

EXHIBIT 35

(Part 10)



State of Idaho

DEPARTMENT OF HEALTH AND WELFARE
Division of Medicaid

Bureau of Medicaid Programs and Resource Management


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November 28, 2000

MEDICAID INFORMATION RELEASE 2000 - 56

TO: ALL PHARMACIES

FROM: PAM MASON, Acting Bureau Chief 
Bureau of Medicaid Programs and Resource Management

**SUBJECTS: NEW BRAND NAME VS. GENERIC POLICY
FEDERAL UPPER LIMIT (FUL) AND STATE MAXIMUM ALLOWABLE COST
(SMAC) - EFFECTIVE DECEMBER 7, 2000**

The handwritten "Dispense as Written" override for brand name drugs on the enclosed list will no longer be recognized effective December 7, 2000. They will require a prior authorization (P.A.) requested by the prescriber and issued by the Department. If you are uncertain about package size or authorization requirements, your in-store Point of Service (P.O.S.) device will be of assistance to you. Should you stock a brand name product, which you purchase under a favorable contract and are willing to accept the FUL or SMAC cost, the pharmacy may request a P.A. directly, without involving the prescriber.

Thank you for your efforts and cooperation in attempting to control the escalating Medicaid drug expenditures. Should you have any questions, please direct them to:

Gary P. Duerr R.Ph.
Bureau of Medicaid Programs
Americana Terrace
PO Box 83720
Boise ID 83720-0036
(208) 364-1829

GD/MH/mg

Enclosures

ID004064



IDAHO MEDICAID PROGRAM UPDATE

Attention: Idaho Prescribers and Pharmacists

This is a follow-up to our previous mailing regarding the legislative mandate requiring generic drug prescribing for Medicaid patients. Enclosed you will find a list of brand name drugs which will require generic substitution unless a prior authorization (P.A.) has been requested by the prescriber and approved by the Department. The scheduled starting date is December 7, 2000.

You will note the absence of anticonvulsants, Clozapine and Warfarin, even though they may appear on the Federal Upper Limit (FUL) master list. You will not be asked to request a P.A. for these brands to maintain a well-controlled patient. However, we would ask your support in utilizing generics with new patients whenever possible. Your consideration is earnestly solicited to slow the unprecedented increases in the State prescription drug budget.

This is a major undertaking by the Department, and we thank you for your efforts and cooperation. Should you have any questions, please direct them to:

Gary P. Duerr R.Ph.
Pharmacy Services Specialist
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Americana Terrace
PO Box 83720
Boise ID 83720-0036
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ID004065

**BRAND NAME DRUGS REQUIRING PRIOR AUTHORIZATION FOR IDAHO MEDICAID PRESCRIPTION
DRUG COVERAGE - 12/2000**

Actifed w/codeine	E.E.S., Eryped 200	Nalfon	Tenormin
AK-Pred, Inflamase	Elavil	Naphcon Forte, Vasocon	Tessalon Perles
Albalon, Naphcon Forte	Eldepryl	Naprosyn	Theo-Dur, Theocron
Aldactazide	E-Mycin, Ery-Tab, PCE	Naprosyn EC	Theolair-SR, Slo-Phyllin
Aldactone	Enduron, Aquatensen	Navane	Tobrex
Aldomet	Equanil, Miltown	Neosporin	Tofranil
Aminophylline	Ery-gel, Erycette	Neptazane	Tolectin
Anafranil	Estrace	Nizoral	Tollinase
Anaprox	Fastin	Norpramin	Topicort
Ansaid	Feldene	Ogen	Toradol
Apresoline	Fioricet, Esgic	Omnipen, Polycillin	Trandate, Normodyne
Aristocort, Kenalog Topical	Fiorinal, Isollyl	Ophthetic	Tranxene
Asendin	Flagyl, Protostat	Orudis, Oruvail	Trental
Atarax	Flexeril	Pediazole	Triavil, Etrafon
Ativan	FML	Percocet, Tylox	Tridesilon, DesOwen
Aventyl, Pamelor	Folvite	Percodan	Trifed-C, Triacin-C
Azulfidine	Fulvicin P/G,	Periactin	Trilafon
Bactrim, Septra	Garamycin, Genoptic	Peridex	Trimox, Wymox
Benadryl	Glucotrol	Persantine	Trimpex
Benemid	Gris-PEG	Phenergan DM	Tylenol w/codeine
Bentyl	Halcion	Phenergan Plain	V-Cillin K, Pen Vee K
Betagan	Haldol	Phenergan VC	Valisone
Blocadren	Hycodan	Pherergan VC w/codeine	Vasotec
Bromanate DC	Hydergine	Phenergan w/codeine	Vibramycin, Doryx
Bromfed-DM	Hygroton	Plaquenil	Vicodin
Bromphen	Hytone, Anusol HC Cream	Polymox, Amoxil	Visken
Bromphen DC w/codeine	Ilosone	Polytrim	Vistaril
Bumex	Imdur, Ismo	Pred Forte, Econopred	Voltaren
Calan SR, Isoptin SR	Inderal (Not LA)	Prelone	VoSol, VoSol HC
Calan, Isoptin	Inderide	Principen	Wellbutrin
Capoten	Indocin	Procardia (20mg only)	Wygesic
Capozide	Isopto Cetamide	Prolixin	Wystensin
Carafate	Isordil	Pronestyl	Xanax
Cardene	K-Dur 10, Klor Con 10	Propine	Xylocaine
Cardizem	Keflex	Prosom	Zantac
Cardura	Klonopin	Proventil, Ventolin	Ziac
Cataflam	Lacticare-HC, Synacort	Provera, Cycrin	Zovirax
Catapres	Laniazid	Questran	
Ceclor	Lasix	Questran Light	
Cephulac, Chronulac,	Leucovorin	Quinaglute	
Duphalac	Lidex, Fluonex	Reglan	
Chlor-Trimeton	Lioresal	Restoril	
Chronulac	Lioresal DS	Revia	
Cleocin	Lodine	Rheumatrex	
Cleocin-T	Lomotil	Ritalin	
Clinoril	Loniten	Robaxin	
Cogentin	Lopid	Sectral	
Compazine	Lopressor	Selsun, Exsel	
Cordarone, Pacarone	Lortab, Lorcet	Serax	
Corgard	Lozol	Silvadene	
Cort-Dome, Dermacort	Ludimil	Sinemet	
Cyclogyl	Macrobid	Sinequan	
Darvocet-N 100	Macrochantin	Slow-K, Klor Con 8	
Darvon	Maxitrol	Sodium Sulamyd, Bleph-10,	
Decadron Oral, Hexadrol	Maxzide, Dyazide	I. Cetamide	
Deltasone	Medrol	Soma	
Desyrel	Megace	Soma Cpd	
Dexacidin	Mellaril	Soma w/codeine	
Dexasporin	Mexitil	Stelazine	
Diabeta	Micro K, Klor Con 10	Sultrin	
Diabinese	Minipress	Sumycin, Achromycin V	
Diamox	Minocin	Symmetrel, Symadine	
Dimetane DC	Moduretic	Tagamet	
Dimetane-DX	Motrin	Tavist	
Diprosone, Maxivate	Mucomyst, Mucomyst 10	Tegopen, Cloxapen	
Disalcid	Mycolog II	Temovate, Cormax	
Ditropan	Mycostatin	Tenex	
Dolobid	Mydracvl, Opticvl	Tenoretic	

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
	Acetabutoiol Hydrochloride			Sectral	
26460	200mg Capsule	0.4613	.8025 (B)		
26461	400mg Capsule	0.6713	1.0703 (B)		
	Acetaminophen; Butalbital; Caffeine			Fioricet, Esgic	
72530	325mg; 50mg; 40mg Tablet	0.0550	.0428 (B)		
	Acetaminophen; Codeine Phosphate			Tylenol w/codeine	
70131	300mg; 15mg Tablet #2	0.0980	.0554 (B)		
70134	300mg; 30mg Tablet #3	0.1200	.0875 (B)		
70136	300mg; 60mg Tablet #4	0.2280	.1337 (B)		
	Acetaminophen; Hydrocodone Bitartrate			Vicodin, Anexsia Lortab, Lorcet, Norc	
70331	500mg; 5mg Tablet	0.1060	.0491 (B)		
70320	500mg; 5mg Capsule	0.1943	.2025 (B)		
70339	500mg; 7.5mg Tablet	0.2300	.1837 (B)		
70333	650mg; 7.5mg Tablet	0.1850	.1462 (B)		
70332	650mg; 10mg Tablet	0.1850	.2235 (B)		
70335	750mg; 7.5mg Tablet	0.1750	.1462 (B)		
70330	+325mg; 10mg Tablet	0.5900			
	Acetaminophen; Oxycodone HCl			Percocet, Tylox	
70491	325mg; 5mg Tablet	0.1190	.0825 (B)		
70500	500mg; 5mg Capsule	0.2250	.2919 (B)		
	Acetaminophen; Propoxyphene HCl			Wygesic	
70925	650mg; 65mg Tablet	0.1688	.1313 (B)		
	Acetaminophen; Propoxyphene Napsylate			Darvocet-N	
70931	650mg; 100mg Tablet	0.2510	.0638 (B)		
	*Acetazolamide			Diamox	
34721	125mg Tablet	0.0760			
34722	250mg Tablet	0.2565			
	Acetic Acid, Glacial			VoSol	
34341	2% Otic Soln, 15ml	2.07	1.88 (B)		
	Acetic Acid, Glacial HC			VoSol HC	
88100	2%, 1% Otic Soln, per ml	0.4500	.4275 (B)		
	Acetylcysteine			Mucumyst, Mucomy	
02400	10% Inh. Soln, 4ml pe	0.8060	.6330 (B)		
	10% Inh. Soln, 10ml pe	0.7640	.3345 (R)		
	+10% Inh. Soln, 30ml pe	0.7640	.4565 (R)		
02401	20% Inh. Soln, 4ml pe	0.9710	.9143 (B)		
	20% Inh. Soln, 10ml pe	0.9290	.3405 (R)		
	+20% Inh. Soln, 30 ml pe	0.9290	.4410 (R)		
	Acyclovir			Zovirax	
43790	200mg Capsule	0.3530	.3440 (B)		
13724	400mg Tablet	0.7050	.6266 (R)		
13721	800mg Tablet	1.2160	1.2680 (R)		
	Albuterol Sulfate			Proventil, Ventolin	
20100	2mg Tablet	0.0380	.0267 (B)		
20101	4mg Tablet	0.0550	.0378 (B)		
22780	2mg/5ml Syrup, per ml	0.0350	.0111 (B)		
41681	+0.83% Inh. Soln, 3ml	0.1990	.1990 (B)		
20110	90mcg Aero. Inh., 17gm	0.3490	.4394 (B)		
41680	*.5% Inh. Soln, 20ml	0.3330			
	Allopurinol			Zyloprim, Lopurin	
07070	100mg Tablet	0.0510	.0323 (B)		
07071	300mg Tablet	0.1198	.0677 (B)		
	Alprazolam			Xanax	
14260	0.25mg Tablet	0.0560	.0567 (B)		
14261	0.5mg Tablet	0.0690	.0646 (B)		
14262	1mg Tablet	0.0920	.0880 (B)		
14263	+2mg Tablet	0.1537	.1537 (B)		

*New Addition

+SMAC

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** No Idaho Coverage

ID004067

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
Amantadine HCl					
17520	100mg Capsule	0.1572	.1762 (B)	Symmetrel, Symadin	
17530	50mg/5ml Syrup, per ml	0.0720	.0623 (B)		
Amloride Hydrochloride					
27700	5mg Tablet		.0642 (B)	Midamor Deleted 12/07/00	
Amloride HCl; HCTZ					
82341	5mg; 50mg Tablet	0.0675	.0642 (B)	Moduretic	
Aminophylline					
00561	100mg Tablet	0.0278	.0332 (B)	Aminophylline	
00564	*200mg Tablet	0.0390			
*Amlodarone Hydrochloride					
10920	200mg Tablet	1.8912		Cordarone, Pacaron	
Amitriptyline HCl					
15270	10mg Tablet	0.0315	.0199 (B)	Elavil Common brand name, Endep, not covered	
15273	25mg Tablet	0.0330	.0165 (B)		
15274	50mg Tablet	0.0400	.0219 (B)		
15275	75mg Tablet	0.0592	.0312 (B)		
15271	100mg Tablet	0.0760	.0353 (B)		
15272	150mg Tablet	0.1800	.0675 (B)		
Amitriptyline HCl; Perphenazine					
15431	10mg; 2mg Tablet	0.0652	.0494 (B)	Triavil, Etrafon	
15433	10mg; 4mg Tablet		.0581 (B)		
15435	25mg; 2mg Tablet	0.0870	.0585 (B)		
15434	25mg; 4mg Tablet	0.0983	.0710 (B)		
Amoxapine					
15332	25mg Tablet	0.3524	.3825 (B)	Asendin	
15333	50mg Tablet	0.5426	.6128 (B)		
15330	100mg Tablet	0.9300	1.0388 (B)		
15331	150mg Tablet, 30	1.5475	1.5975 (B)		
Amoxicillin					
39660	250mg Capsule	0.0636	.0735 (B)	Polymox, Amoxil, Trimox, Wymox	
39661	500mg Capsule	0.1270	.3119 (B)		
39681	125mg/5ml			Deleted 12/07/00	
	Oral Susp., 80ml		2.25 (B)		
	Oral Susp., 100ml	2.10	1.65 (B)		
	Oral Susp., 150ml	1.79	1.94 (B)	Deleted 12/07/00	
39683	250mg/5ml				
	Oral Susp., 80ml		4.32 (B)		
	Oral Susp., 100ml	2.18	2.25 (B)		
	Oral Susp., 150ml	3.15	2.78 (B)	Deleted 12/07/00	
39651	*250mg Chewable Tablet	0.1600			
Ampicillin/Ampicillin Trihydrate					
39271	250mg Capsule	0.0850	.1042 (B)	Omnipen, Polycillin, Principen	
39272	500mg Capsule	0.1115	.1343 (B)		
39313	125mg/5 ml			Deleted 12/07/00	
	Oral Susp., 100ml		2.25 (R)		
	Oral Susp., 200ml		3.98 (B)		
39316	250mg/5ml			Deleted 12/07/00	
	Oral Susp., 100ml		3.15 (R)		
	Oral Susp., 200ml		5.48 (R)		
Aspirin; Butalbital; Caffeine					
	325mg/ 50mg; 40mg			Fiorinal, Isollyl	
71160	+Tablet	0.588	.0488 (B)		
71150	Capsule	0.3691	.3443 (B)	Deleted 12/07/00	
Aspirin; Caffeine; Propoxyphene HCl					
70810	389mg; 32.4mg; 65mg Capsule		.1689 (B)	Darvon Cpd 65 Deleted 12/07/00	
Aspirin; Carisoprodol					
94380	325mg; 200mg Tablet	0.5960	.4314 (B)	Soma Cpd	
Aspirin; Methocarbamol					
73581	325mg; 400mg Tablet		.1445 (B)	Robaxinal Deleted 12/07/00	

*New Addition

+SMAC

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** No Idaho Coverage

ID004068

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
	Aspirin; Oxycodone HCl; Oxycodone Terephthalate 325mg; 4.5mg; 0.38mg			Percodan
70481	Tablet	0.1313	.1964 (B)	
	Atenolol			Tenormin
20662	25mg Tablet	0.0460	.0413 (B)	
20661	+50mg Tablet	0.0535	.0435 (B)	
20660	100mg Tablet	0.0672	.0590 (B)	
	Atenolol; Chlorthalidone			Tenoretic
66990	50mg; 25mg Tablet	0.2550	.1725 (B)	
66991	100mg; 25mg Tablet	0.3730	.2625 (B)	
	*Atropine Sulfate; Diphenoxylate HCL			Lomotil
65030	.025mg; 2.5mg Tablet	0.3743		
	Bacitracin Zinc; Neomycin Sulf; Polymyxin B Sulfate 400 units/gm; Eq. 3.5mg base/gm			Neosporin
87199	10,000 units/gm Opth Oint, 3.5gm		2.56 (B) Deleted 12/07/00	
	Baclofen			Lioresal, Lioresal DS
18010	10mg Tablet	0.0899	.0800 (B)	
18011	20mg Tablet	0.1688	.1505 (B)	
	Benzonatate			Tessalon Perles
29840	100mg Capsule	0.3899	.3638 (B)	
	Benztropine Mesylate			Cogentin
17620	0.5mg Tablet	0.0360	.0222 (B)	
17621	1mg Tablet	0.0380	.0360 (B)	
17622	2mg Tablet	0.0430	.0397 (B)	
	Betamethasone Dipropionate			Diprosone, Maxivate
31060	0.05% Cream, Topical = or <15gm, per gm	0.2130	.2250 (B)	
	>15 gm, per gm	0.1313	.1317 (B)	
31080	0.05% Lotion, Topical			
	20ml		3.20 (B) Deleted 12/07/00	
	60ml	8.64	9.57 (B)	
31070	* 0.05% Ointment, Topical			
	15 gm	5.02		
	45gm	10.04		
	Betamethasone Valerate			Valisone
31101	0.1% Cream, Topical			
	15gm, per gm	0.1130	.1200 (B)	
	45gm, per gm	0.0750	.0733 (B)	
31120	0.1% Lotion, Topical			
	60ml	6.53	6.67 (B)	
31110	0.1% Ointment, Topical			Deleted 12/07/00
	15gm, per gm		.1650 (B)	
	45gm, per gm		.1800 (B)	
	Bethanechol Chloride			Urecholine, Duvoid
18351	10mg Tablet		.0390 (B) Deleted 11/20/98	
18352	25mg Tablet		.0443 (B) Deleted 10/22/98	
18354	50mg Tablet		.1163 (B) Deleted 11/20/98	
	*Bisoprolol Fumerate			Ziac
45061	+2.5mg/6.25 Tablet	0.6555		
45062	+5mg/6.25mg Tablet	0.6555		
45063	+10mg/6.5mg Tablet	0.6555		
	Bromodiphenhydramine HCl; Codeine Phosphate			Bromanyl; Ambenyl, Bromotuss w/cod
98033	12.5mg - 10mg/5ml Syrup, per ml		0.0186 (B) Deleted 12/07/00	
	Brompheniramine Maleate; Codeine Phosphate; Phenylpropanolamine HCl			Bromanate DC, Bromphen DC w/cod Dimetane DC
52390	2mg-10mg-12.5mg/5ml Syrup, per ml	0.0260	0.244 (B)	

*New Addition

+SMAC

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** No Idaho Coverage

ID004069

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
	Brompheniramine Maleate; Dextromethorphan HBr; Pseudoephedrine HCl			Bromfed-DM, Bromphen, Dimetane-DX
96136	2mg-10mg-30mg/5ml Syrup, per ml	0.0160	.0136 (B)	
	Bumetanide			Bumex
35020	.5mg Tablet	0.1613	.1463 (B)	
35021	1mg Tablet	0.2810	.1725 (B)	
35022	2mg Tablet	0.3675	.2138 (B)	
	*Bupropion Hydrochloride			Wellbutrin
18100	75mg Tablet	0.6000		
18101	100mg Tablet	0.8000		
	Butalbital; Acetaminophen; Caffeine (see listing under A)			
	Butalbital; Aspirin; Caffeine (see listing under A)			
	Captopril			Capoten
01483	12.5mg Tablet	0.0480	.0375 (B)	
01481	25mg Tablet	0.0560	.0545 (B)	
01482	50mg Tablet	0.1180	.0990 (B)	
01480	100mg Tablet	0.2020	.1883 (B)	
	*Captopril; HCTZ			Capozide
54940	25mg; 15mg; Tablet	0.2313		
54941	25mg; 25mg; Tablet	0.2313		
54942	50mg; 15mg; Tablet	0.3629		
54943	50mg; 25mg; Tablet	0.3629		
	Carbamazepine			Tegretol
17460	100mg Tablet, Chewable		.1467 (B) Deleted 12/07/00	
17450	200mg Tablet (no P.A. on B)	0.1500	.1275 (B)	
	Carbidopa; Levodopa			Sinemet
62740	10mg; 100mg Tablet	0.1971	.2553 (B)	
62741	25mg; 100mg Tablet	0.2127	.2754 (B)	
62742	25mg; 250mg Tablet	0.2513	.3255 (B)	
	Carisoprodol			Soma
17912	350mg Tablet	0.3743	.0588 (B)	
	Carisoprodol; Aspirin (see listing under A)			
94380	*Carisoprodol; ASA; Codeine	1.7500		Soma Compound
	Cefaclor			Ceclor
40020	250mg Capsule	0.9290	1.1948 (B)	
40021	500mg Capsule	1.7990	2.3985 (B)	
40030	125mg/5ml			
	Oral Susp, 75ml		10.13 (B) Deleted 12/07/00	
	Oral Susp, 150ml	19.80	21.28 (B)	
40032	187mg/5ml			
	Oral Susp, 50ml		10.12 (B) Deleted 12/07/00	
	Oral Susp, 100ml	20.00	21.30 (B)	
40031	250mg/5ml			
	Oral Susp, 75ml		18.13 (B) Deleted 12/07/00	
	Oral Susp, 150ml	36.60	36.36 (B)	
40033	375mg/5ml			
	Oral Susp, 50ml		19.13 (B) Deleted 12/07/00	
	Oral Susp, 100ml	36.60	36.37 (B)	
	Cephalexin			Keflex, Keftab
39990	250mg Tablet		.3593 (R) Deleted 12/07/00	
	250mg Capsule	0.1700	.1103 (B)	
39802	500mg Capsule	0.2150	.2025 (B)	
39832	125mg/5ml			
39801	Oral Susp, 100ml		2.55 (B) Deleted 12/07/00	
	Oral Susp, 200ml	6.20	4.20 (B)	
39812	250mg/5ml			
	Oral Susp, 100ml	5.10	7.89 (B)	
39811	Oral Susp, 200ml	9.00	6.30 (B)	
	Cephadrine			Velosef, Anspor
39812	250mg Capsule		.3658 (B) Deleted 12/07/00	

*New Addition

+SMAC

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** No Idaho Coverage

ID004070

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Chlordiazepoxide HCl				
14033	5mg Capsule		.0358 (B)	Deleted 12/07/00
14031	10mg Capsule	0.0950	.0315 (B)	Common brand nam
14032	25mg Capsule	0.1090	.0371 (B)	Librium, not covered
Chlordiazepoxide/Amitriptyline HCl (see listing under A)				
Chlorhexidine Gluconate				
37950	0.12% Dental Soln., 480ml	7.20	5.23 (M)	Peridex
Chlorothiazide				
34802	250mg Tablet		.0518 (M)	Diuril
34803	500mg Tablet		.0576 (B)	Deleted 12/07/00
** Chlorpheniramine Maleate				
46512	4mg Tablet	0.0100	.0103 (B)	Chlor-Trimeton
Chlorpropamide				
05731	100mg Tablet	0.1840	.2315 (B)	Diabinese
05732	250mg Tablet	0.3885	.4897 (B)	
Chlorthalidone; Atenolol (see listing under A)				
Chlorthalidone				
34982	25mg Tablet	0.0510	.0278 (B)	Hygroton
34984	50mg Tablet	0.0560	.0417 (B)	
Chlorzoxazone				
17901	500mg Tablet		.0848 (B)	Parafon Forte DSC Deleted 12/07/00
Cholestyramine				
09920	4gm in a 9gm Powder Pckt,	0.9004	.9474 (B)	Questran,
09840	+Powder Can, 378gm, per g	0.0847	.1585 (B)	Questran Light
	+Powder Can, 378gm, Light,	0.1524		
Cimetidine				
46750	200mg Tablet	0.1238	.1365 (B)	Tagamet
46751	300mg Tablet	0.1080	.1553 (B)	
46752	400mg Tablet	0.1178	.1770 (B)	
46753	800mg Tablet	0.3261	.4155 (B)	
Cimetidine HCL				
46740	*300mg/5ml Oral Soln., per m	0.1140		Tagamet
Clemastine Fumarate				
46691	2.68mg Tablet	0.3572	.3822 (B)	Tavist
Clindamycin HCl				
40830	*150mg Capsule	0.9230		Cleocin
** Clindamycin Phosphate				
31720	1% Topical Soln, 30ml	6.29	7.47 (B)	Cleocin-T
	1% Topical Soln, 60ml	18.90	11.23 (B)	
32130	*Clobetasol Cream/Ointment 0.05%			Temovate, Cormax
32140	+15gm	14.00		
	+30gm	18.00		
	+45gm	34.00		
	+60gm	39.00		
15891	*Clobetasol Top. Soln. 0.05%			Temovate
	+25ml	18.00		
	+50ml	35.00		
Clomipramine HCL				
16301	25mg Capsule	0.3750	.5896 (B)	Anafranil
16302	50mg Capsule	0.4985	.7909 (B)	
16303	75mg Capsule	0.6464	1.0192 (B)	
Clonazepam				
17470	.5mg Tablet	0.2760	.4146 (B)	Klonopin
17471	*1mg Tablet	0.3210	.9926 (B)	
17472	*2mg Tablet	0.4390	1.3754 (B)	
Clonidine HCl				
01390	0.1mg Tablet	0.0900	.0240 (B)	Catapres
01391	0.2mg Tablet	0.1275	.0270 (B)	
01392	0.3mg Tablet	0.1650	.0338 (B)	

*New Addition

+SMAC

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** No Idaho Coverage

ID004071

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
	Clonidine HCl; Clorthalidone (see listing above)			
	Clorazepate Dipotassium			
	Tranxene			
14092	3.75mg Tablet	0.8351	1.0363 (B)	
14093	7.5mg Tablet	1.0388	1.2894 (B)	
14090	15mg Tablet	1.4094	1.7494 (B)	
	Cloxacillin Sodium			
	Tegopen, Cloxapen			
39170	250mg Capsule		.1553 (B)	Deleted 12/07/00
39171	500mg Capsule		.2992 (B)	
	Codeine Phosphate; Acetaminophen Tablets (see listing under A)			
	Codeine Phosphate; Bromodiphenhydramine HCl Syrup (see listing under B)			
	Codeine Phosphate; Brompheniramine Maleate; Phenylpropanolamine HCl S (see listing under B)			
	Codeine Phosphate; Phenylephrine			
	HCl; Promethazine HCl			
	Phenergan VC w/codeine			
52380	10mg-5mg-6.25mg/5ml, Syrup			
	120, per ml			Deleted 12/07/00
	480, per ml	0.0190	.0123 (B)	
	Codeine Phosphate; Promethazine HCl			
	Phenergan w/codeine			
52360	10mg-6.25mg/5ml Syrup, pe	0.0128	.0111 (B)	
	Codeine Phosphate; Pseudoephedrine			
	HCl; Triprolidine HCl			
	Actifed w/codeine, Trifed-C, Triacin-C			
	10mg-30mg-1.25mg/5ml			
96403	Syrup, per ml	0.0190	.0103 (B)	
	Cyclobenzaprine HCl			
	Flexeril			
18020	10mg Tablet	0.0910	.0891 (B)	
	*Cyclopentolate HCl			
33031	1% Opth Soln., 15ml	0.4810		Cyclogyl
	Cypheptadine HCl			
	Periactin			
15811	4mg Tablet		.0159 (B)	
15803	2mg/5ml Syrup, 480ml		.0133 (B)	Deleted 12/07/00
	Desipramine HCl			
	Norpramin			
15310	10mg Tablet		.1484 (B)	Deleted 12/07/00
15313	25mg Tablet	0.0675	.0638 (B)	
15314	50mg Tablet	0.0825	.0983 (B)	
15315	75mg Tablet	0.0900	.1163 (B)	
15311	100mg Tablet	0.4370	.4089 (B)	
	*Desonide			
	DesOwen, Tridesilon			
31430/3	0.05% Ointment and +Cream, Topical			
	15gm, per gm	0.5840		
	60gm, per gm	0.4077		
	Desoximetasone			
	Topicort, Topicort LP			
31181/3080	0.25% Cream and +Ointment, Topical			
	15gm, per gm	0.8130	.6780 (B)	
	+60gm, per gm	0.5000	.4052 (B)	
31180	0.05% Cream, Topical			
	+15gm, per gm	0.7900		
	+60gm, per gm	0.4000		
06120	0.05% Gel, Topical			
	+15gm, per gm	1.1200		
	+60gm, per gm	0.7000		
	Dexamethasone			
	Decadron, Hexadrol			
27400	0.5mg/5ml Elixer, per ml	0.0400	.1118 (R)	
27422	+0.5mg Tablet	0.1000		
41691	+0.75mg Tablet	0.1100		
27428	+4mg Tablet	0.1500		
	Dexamethasone; Neomycin Sulfate; Polymyxin B Sulfate			
	Maxitrol, Dexasporin, Dexacidin			
	0.1%; Eq. 3.5mg Base/gm;			
87329	10,000 units/gm OP Oint, 3.	3.75	4.20 (B)	

*New Addition

+SMAC

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** No Idaho Coverage

ID004072

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Dexamethasone Sodium Phosphate				
33220	0.1% OP Soln, 5ml		2.40 (B)	Decadron, Maxidex
Dexamethasone Sodium Phosphate; Neomycin Sulfate				
87570	0.1% 3.5mg base/ml, Oph Soln, 5ml		4.23 (B)	NeoDecadron
Dextromethorphan HBr; Brompheniramine Maleate; Pseudoephedrine HCl Sy (see listing under B)				
Dextromethorphan HBr; Promethazine HCl				
96102	15mg-6.25mg/5ml Syrup			Phenergan w/ Dextromethorpha
	*120ml, per ml	0.0199		
	480ml, per ml	0.0111	.0103 (B)	
Diazepam				
14221	2mg Tablet	0.0300	.0209 (B)	Common brand name, Valium, not covered
14222	5mg Tablet	0.0320	.0465 (B)	
14220	10mg Tablet	0.0420	.0265 (B)	
*Diclofenac Potassium				
13960	50mg Tablet	0.8630		Cataflam
Diclofenac Sodium DELAYED RELEASE				
35851	50mg Tablet	0.4748	.7490 (B)	Voltaren
35852	75mg Tablet	0.6560	.9219 (B)	
Dicloxacillin Sodium				
39541	250mg Capsule		.3743 (B)	Pathocil, Dynapen, Dycill
39542	500mg Capsule		.6585 (B)	Deleted 12/07/00
Dicyclomine HCL				
19261	10mg Capsule	0.1223	.1763 (B)	Bentyl
19331	20mg Tablet	0.1428	.0405 (M)	
** Diethylpropion HCL				
20771	25mg Tablet		.0713 (R)	Tenuate
16851	*Diflunisal 500mg Tablet, 60	0.475		Deleted 12/07/00
Diltiazem HCl				
02360	30mg Tablet	0.1160	.0818 (B)	Cardizem
02361	60mg Tablet	0.1810	.1380 (B)	
02362	90mg Tablet	0.2180	.1941 (B)	
02363	120mg Tablet	0.3520	.2379 (B)	
** Diphenhydramine HCl				
45972	50mg Capsule		.0191 (B)	Benadryl
OTC-COVERED ONLY AS AN INGREDIENT IN COMPOUNDED RX FORMULATI				
46030	12.5mg/5ml Elixir, per ml	0.0080	.0061 (B)	
45971	*25mg Capsule	0.0250		
46032	25mg Tablet		.0132 (B)	Deleted 12/07/00
Dipivefrin HCl				
33060	0.1% OP Soln 5ml	4.35	10.95 (M)	Propine
	0.1% OP Soln 10ml	6.36	20.25 (M)	
	0.1% OP Soln 15ml	10.92	30.15 (M)	
Dipyridamole				
02021	+25mg Tablet	0.0500	.0252 (B)	Persantine
02022	+50mg Tablet	0.0600	.0413 (B)	
02023	75mg Tablet	0.0770	.0593 (B)	
Disopyramide Phosphate				
01130	100mg Capsule		.2730 (B)	Norpace
01131	150mg Capsule		.3120 (B)	Deleted 12/07/00
*Doxazosin Mesylate				
33431	1mg Tablet	0.7000		Cardura
33432	2mg Tablet	0.7000		
33433	4mg Tablet	0.7000		
33434	8mg Tablet	0.7000		

*New Addition

+SMAC

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** No Idaho Coverage

ID004073

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
Doxepin HCl					
15360	10mg Capsule	0.1720	.0398 (B)	Sinequan	
15363	25mg Capsule	0.1820	.0443 (B)		
15364	+50mg Capsule	0.1200	.0645 (B)		
15365	75mg Capsule	0.1290	.0860 (B)		
15361	100mg Capsule	0.3830	.1043 (B)		
15362	+150mg Capsule	0.3000	.2543 (B)		
15380	10mg/ml Oral Conc, per ml	0.1144	.1362 (B)		
Doxycycline Hyclate					
40333	*50mg Capsule, 50	0.0819		Vibramycin, Doryx,	
40331	*100mg Capsule, 50	0.1050		Vibra-Tabs,	
40360	*100mg Tablet, 50	0.0953			
*+Enalapril Maleate					
00963	2.5mg Tablet	0.5893		Vasotec	
00960	5mg Tablet	0.7488			
00961	10mg Tablet	0.7859			
00962	20mg Tablet	1.1185			
Ergoloid Mesylates					
02237	1mg Tablet		.1368 (B)	Hydergine Deleted 12/07/00	
Erythromycin					
40660	250mg Capsule SR	0.1890	.1793 (B)	E-Mycin, Ery-Tab, P	
33540	5mg/gm Oph Oint, 3.5gm		3.52 (B)	Deleted 12/07/00	
**31710	2% Topical Gel, 30gm		.6270 (B)	Deleted 12/07/00	
**77562	2% Topical Soln, 60ml	0.0650	.0570 (B)	Ery-gel, Erycette	
**31760	2% Topical Swab, 60		.2822 (B)	Deleted 12/07/00	
Erythromycin Estolate					
40462	250mg Capsule		.2903 (B)	Ilosone Deleted 12/07/00	
40471	125mg/5ml Susp, Oral, 480 ml		.0623 (B)		
Erythromycin Ethylsuccinate					
40522	200mg/5ml Oral Susp, per	0.0340	.0253 (B)	E.E.S., Eryped	
40526	400mg/5ml Oral Susp, per ml		.0436 (B)	Deleted 12/07/00	
Erythromycin Ethylsuccinate; Sulfisoxazole Acetyl					
89560	+200mg - 600mg/5ml, Oral Granule			Pediazole	
	100ml	7.46	7.46 (B)		
	150ml	10.72	10.72 (B)		
	200ml	13.86	13.66 (B)		
*Estazolam					
19181	1mg Tablet	0.5954		Prosom	
19182	2mg Tablet	0.6563			
Estradiol					
10772	0.5mg Tablet	0.1793	.2152 (B)	Estrace	
10770	1mg Tablet	0.2205	.2887 (B)		
10771	2mg Tablet	0.3060	.4192 (B)		
Estropipate					
11080	0.75mg Tablet	0.3453	.4672 (B)	Ogen	
11084	1.5mg Tablet	0.3614	.4192 (B)		
11085	+3mg Tablet	0.7000	1.0939 (B)		
Ethinyl Estradiol; Norethindrone					
11471	0.035mg; 0.5mg Tablet, Oral-21		1.0743 (R)	Modicon, Brevicon, Genora, Nelova, Deleted 10/01/00	
	Tablet, Oral-28		.4025 (B)	Norethin, Norinyl	
11474	0.035mg; 1mg Tablet, Oral-21		.5367 (B)	Ortho-Novum,	
	Tablet, Oral-28		.3828 (B)	Deleted 12/07/00	
Etodolac					
33870	*200mg Capsule	0.4800		Lodine	
33871	300mg Capsule	0.5100	.5932 (B)		
61761	400mg Tablet	0.3450	.5823 (B)		
61766	*500mg Tablet	1.0032			
Fenoprofen Calcium					
35760	600mg Tablet	0.2990	.2085 (B)	Nalfon	

*New Addition

+SMAC

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** No Idaho Coverage

ID004074

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
Fluocinolone Acetonide				Synalar, Synemol, Fluonid	
31342	0.01% Cream, Topical				
	15gm, per gm		.0840 (B)		
	60gm, per gm		.0413 (B)		
31344	0.025% Cream, Topical				
	15gm, per gm		.1050 (B)		
	60gm, per gm		.0575 (B)		
31351	0.025% Oint, Topical				
	60gm, per gm		.1445 (R)		
31360	0.01% Soln, Topical				
	20ml		3.52 (B)	Deleted 12/07/00	
	60ml	7.02	5.63 (B)		
Fluocinonide				Lidex, Lidex-E, Fluonex	
31390	0.05% Cream, Topical				
54650	15gm	0.1880	2.72 (B)		
	30gm	0.1439	3.77 (B)		
	60gm	0.1187	8.07 (B)		
	>60gm, per gm		.2036 (R)	Deleted 12/07/00	
31380	0.05% Gel, Topical, per gm		.5978 (B)		
31401	0.05% Soln., Topical, 60ml	15.84	14.52 (B)		
31400	0.05% Ointmt., Topical				
	15gm		15.05 (B)		
	30gm		16.39 (R)		
	60gm		34.66 (B)	Deleted 12/07/00	
Fluorometholone				FML	
33250	0.1% OP Susp./Drops				
	5ml	8.30	12.53 (M)		
	10ml	11.84	19.88 (M)		
	15ml	13.43	24.75 (M)		
Fluphenazine HCl				Prolixin	
14602	1mg Tablet	0.2120	.1881 (B)		
14604	2.5mg Tablet	0.2775	.2691 (B)		
14605	5mg Tablet	0.3675	.3521 (B)		
14603	10mg Tablet	0.4760	.4224 (B)		
Flurazepam HCl				Common brand nam Dalmane, not covere	
14250	15mg Capsule	0.0656	.0525 (B)		
14251	30mg Capsule	0.0830	.0675 (B)		
Flurbiprofen				Ansaid	
35710	+50mg Tablet	0.2000	.6021 (B)		
35711	100mg Tablet	0.3680	.3474 (B)		
Folic Acid				Folvite	
94781	1mg Tablet, Oral 100	0.0460	.0195 (B)		
	1mg Tablet, Oral 1000		.0053 (M)	Deleted 12/07/00	
Furosemide				Lasix	
34961	20mg Tablet	0.0420	.0210 (M)		
34962	40mg Tablet	0.0440	.0254 (B)		
34963	80mg Tablet	0.0710	.0473 (B)		
34950	10mg/ml Oral Soln., 60ml, p	0.1300	.1142 (B)		
	*10mg/ml Oral Soln., 120ml, p	0.0893			
Gemfibrozil				Lopid	
25540	+600mg Tablet, 60	0.1800	.1800 (B)		
*Gentamicin Sulfate				Garamycin, Genopti	
31790	1mg/gm Cream, Topical, 15gm			Deleted 12/07/00	
31800	1mg/gm Ointment, Topical 1	0.1740			
33590	3mg/gm Ointment, OP, 3.5g	2.6786			
33600	0.3% OP Soln. 5ml	2.45			
	15ml	3.84			
Glipizide				Glucotrol	
10840	5mg Tablet	0.0650	.0635 (B)		
10841	10mg Tablet	0.0937	.0930 (B)		
*Glyburide				Diabeta	
057	1.5mg Tablet	0.2550			
057	3mg Tablet	0.3204			
057	6mg Tablet	0.8471			

*New Addition

+SMAC

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** No Idaho Coverage

ID004075

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
	Gramicidin; Neomycin Sulfate; Polymyxin B Sulfate			Neosporin	
	0.25mg/ml; Eq. 1.75mg/ml; 10,000 units/ml; OP Soln., 10ml				
87220		16.68	5.03 (B)		
	Griseofulvin; Ultramicrocrystalline			Fulvicin P/G, Gris-PEG	
42410	*125mg Tablet	0.3743			
42412	250mg Tablet	0.5093	.5093 (B)		
42413	330mg Tablet	0.6690	.6690 (B)		
	Guanabenz Acetate			Wytensin	
01400	4mg Tablet	0.3675	.4125 (B)		
01401	8mg Tablet	0.5625	.5813 (B)		
	Guanabenz Hydrochloride			Tenex	
32480	1mg Tablet	0.5250	.6293 (B)		
32481	2mg Tablet	0.7200	.8843 (B)		
	Haloperidol			Haldol	
15530	0.5mg Tablet	0.0360	.0188 (B)		
15531	1mg Tablet	0.0400	.0225 (B)		
15533	2mg Tablet	0.0440	.0240 (B)		
15535	5mg Tablet	0.0570	.0293 (B)		
15532	10mg Tablet	0.0770	.0494 (B)		
15534	20mg Tablet		.1788 (B)	Deleted 12/07/00	
	Homatropine Methylbromide; Hydrocodone Bitartrate			Hycodan	
96040	1.5mg/5ml; 5mg/5ml, Syrup.	0.0240	.0715 (B)		
	Hydralazine HCl			Apresoline	
01241	10mg Tablet	0.0350	.0210 (B)		
01243	25mg Tablet	0.0450	.0375 (B)		
01244	50mg Tablet		.0525 (B)		
01242	100mg Tablet		.0855 (B)	Deleted 12/07/00	
	Hydralazine HCl; HCTZ			Apressazide	
51761	25mg; 25mg Capsule		.0675 (B)		
51762	50mg; 50mg Capsule		.0845 (B)	Deleted 12/07/00	
	Hydrochlorothiazide			Hydrodiuril	
34824	25mg Tablet		.0149 (R)		
34825	50mg Tablet		.0278 (M)		
34821	100mg Tablet		.0585 (B)	Deleted 12/07/00	
Hydrochlorothiazide; Amloride HCl (see listing under A)					
Hydrochlorothiazide; Hydralazine HCl (see listing above)					
	Hydrochlorothiazide; Propranolol HCl			Inderide	
52030	25mg; 40mg Tablet	0.0771	.0510 (B)		
52031	25mg; 80mg Tablet	0.1044	.0743 (B)		
	Hydrochlorothiazide; Spironolactone			Aldactazide	
82330	25mg; 25mg Tablet	0.3225	.3603 (B)		
	Hydrochlorothiazide; Triamterene			Maxzide, Dyazide	
88731	*25mg; 37.5mg Capsule	0.3181			
88741	25mg; 37.5mg Tablet	0.2438	.2393 (B)		
88730	*25mg; 50mg Capsule	0.1130			
88740	50mg; 75mg Tablet	0.0530	.0458 (B)		
Hydrocodone Bitartrate; Acetaminophen (see listing under A)					
Hydrocodone Bitartrate; Homatropine Methylbromide Sy (see listing above)					
	Hydrocortisone			Cort-Dome, Dermac	
30943	2.5% Cream, Topical			Hytone, Anusol HC, Lacticare-HC, Synac	
	20gm, per gm	0.1814	.2063 (B)		
	>20gm or <30gm, per gm		.1420 (B)	Deleted 12/07/00	
	30gm, per gm	0.1820	.1927 (B)		
30953	2.5% Ointment, Topical			Deleted 12/07/00	
	20gm		4.50 (B)		

*New Addition

+SMAC

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** No Idaho Coverage

ID004076

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
OTC-COVERED ONLY AS AN INGREDIENT IN COMPOUNDED RX - HYDROCO				
	1% Cream, Topical		.0645 (M)	Deleted 12/07/00
	per gm			
	1% Lotion, Topical		.0725 (M)	
30974	= or <30ml, per ml		.0506 (M)	Deleted 12/07/00
	60ml, per ml			
	*120ml, per ml	0.0640		
	0.5% Cream, Topical			
30941	15gm, per gm		.1060 (R)	Deleted 12/07/00
	30gm, per gm	0.0380	.0220 (R)	
Hydroxychloroquine Sulfate				
42940	200mg Tablet	0.8540	.7763 (B)	Plaquenil
*Hydroxyurea				
38400	500mg Capsule	1.1666		
Hydroxyzine HCl				
13941	10mg Tablet	0.0248	.0195 (B)	Atarax
13943	25mg Tablet	0.0347	.0236 (B)	
13944	50mg Tablet	0.0450	.0315 (B)	
13932	10mg/5ml Syrup, per ml	0.0370	.0141 (B)	
Hydroxyzine Pamoate				
13952	25mg Capsule	0.0794	.0768 (B)	
13953	50mg Capsule	0.1013	.0983 (B)	
13951	100mg Capsule	0.2710	.2243 (B)	
Ibuprofen				
35741	400mg Tablet	0.0640	.0338 (B)	Motrin
35742	600mg Tablet	0.0740	.0399 (B)	
35744	800mg Tablet	0.1070	.0563 (B)	
*Imipramine HCl				
15201	10mg Tablet	0.1557		Tofranil
15203	25mg Tablet	0.1880		
15204	50mg Tablet	0.2290		
Indapamide				
07311	1.25mg Tablet	0.1780	.3938 (B)	Lozol
07310	2.5mg Tablet	0.2080	.1988 (B)	
Indomethacin				
35680	25mg Capsule	0.0440	.0299 (B)	
35681	50mg Capsule	0.0501	.0426 (B)	Indocin
35690	75mg Capsule, ER		.4731 (B)	Deleted 12/07/00
Isoniazid				
41741	100mg Tablet		.0218 (M)	Deleted 12/07/00
41742	300mg Tablet	0.0548	.0353 (M)	Laniazid
Isosorbide Dinitrate				
01947	5mg Tablet, Oral	0.0242	.0188 (B)	Isordil
01942	10mg Tablet, Oral	0.0280	.0188 (B)	
01944	20mg Tablet, Oral	0.0248	.0218 (B)	
01945	30mg Tablet, Oral		.0263 (B)	
01976	2.5mg Tablet, Subling		.0338 (B)	Deleted 12/07/00
01975	5mg Tablet, Subling	0.0300	.0338 (B)	
*Isorbide Mononitrate				
01932	10mg Tablet	0.6110		Imdur, Ismo
01931	20mg Tablet	0.4950		
*Ketoconazole				
42590	200mg Tablet	2.7645		Nizoral
*Ketoprofen				
34420	50mg Capsule	0.4750		Orudis, Oruvail
*Ketorolac Tromethamine				
32531	10mg Tablet	0.6374		Toradol
*Labetalol Hydrochloride				
10342	100mg Tablet	0.4670		Trandate, Normodyn
10341	200mg Tablet	0.6620		
10340	300mg Tablet	0.8810		

*New Addition

+SMAC

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** No Idaho Coverage

ID004077

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Lactulose				
10160	10gm/15ml Oral Soln., per	0.0219	.0228 (B)	Cephulac, Duphalac, Chronulac
Leucovorin Calcium				
94831	5mg Tablet	1.6000	2.0993 (B)	Wellcovorin
26221	25mg Tablet	12.000	15.8910 (B)	
Levobunolol HCl				
33311	*.25% OP Soln/Drops, 10ml	1.2749		Betagan
33310	.5% OP Soln/Drops, 5ml	1.3950	2.0310 (B)	
	.5% OP Soln/Drops, 10ml	1.4930	1.9350 (B)	
	.5% OP Soln/Drops, 15ml	1.4190	2.0750 (B)	
Levodopa; Carbidopa (see listing under C)				
Lidocaine HCl				
11941	2% Oral Soln, 100ml, per ml	0.0278	.0270 (B)	Xylocaine Viscous
Lindane				
31550	1% Lotion, Topical			Kwell
	= or <60ml, per ml		.0650 (B)	Deleted 12/07/00
	+480ml, per ml	0.0619	.0544 (B)	
31570	1% Shampoo, Topical			
	= or <60ml, per ml		.0687 (B)	Deleted 10/15/00
	480ml, per ml	0.1600	.0619 (B)	
Lithium Carbonate				
15710	300mg Capsule, 100's		.0525 (B)	Eskalith, Lithonate
	300mg Capsule, 1000's		.0366 (B)	Deleted 12/07/00
Lithium Citrate				
15741	300mg/5ml Syrup, 480, per ml		.0280 (B)	Deleted 12/07/00
** Loperamide HCL				
08370	2mg Capsule	0.1500	.1455 (B)	Immodium
Lorazepam				
14160	0.5mg Tablet	0.4350	.5088 (B)	Ativan
14161	1mg Tablet	0.5718	.6684 (B)	
14162	2mg Tablet	0.8480	.9910 (B)	
Maprotiline HCl				
15390	+25mg Tablet	0.3000	.2575 (B)	Ludiomil
15391	+50mg Tablet	0.4000	.3228 (B)	
15392	+75mg Tablet	0.6000	.4591 (B)	
** Meclizine HCL				
18301	12.5mg Tablet	0.0370	.0285 (B)	Antivert
18302	25mg Tablet	0.0390	.0255 (B)	
Meclofenamate Sodium				
35811	50mg Capsule		.1706 (B)	Medomen
35810	100mg Capsule		.2579 (B)	Deleted 12/07/00
Medroxyprogesterone Acetate				
11262	*5mg Tablet	0.2250		Cycrin, Provera
11260	+10mg Tablet	0.3500	.1988 (B)	
Megestrol Acetate				
38680	20mg Tablet	0.5000	.4140 (B)	Megace
38681	40mg Tablet	0.8000	.6707 (B)	
Meprobamate				
13801	200mg Tablet	0.1080	.0398 (B)	Equanil, Miltown
13802	400mg Tablet	0.1580	.0480 (B)	
Mestranol; Norethindrone				
11481	0.05mg; 1mg Tablet, Oral-21		.5367 (B)	Norinyl, Genora, Norethin, Nelova, Ortho-Novum
	Tablet, Oral-28		.3828 (B)	Deleted 12/07/00
Metaproterenol Sulfate				
19730	10mg Tablet		.0743 (B)	Alupent, Metaprel
19731	20mg Tablet		.1328 (B)	
19720	10mg/5ml Syrup, per ml		.0134 (B)	Deleted 12/07/00
Methadone HCL				
18415	10mg/ml Concentrate		.1046 (B)	Dolophine HCL
				Deleted 12/07/00

*New Addition

+SMAC

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** No Idaho Coverage

ID004078

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
	Methazolamide			Neptazane
34741	25mg Tablet	0.3260	.3248 (B)	
34740	50mg Tablet	0.5000	.4212 (B)	
	Methocarbamol			Robaxin
17892	500mg Tablet	0.1350	.0627 (B)	
17893	750mg Tablet	0.1710	.0870 (B)	
	Methocarbamol; Aspirin (see listing under A)			
	Methotrexate Sodium			Rheumatrex
38481	+2.5mg Tablet	1.7500	1.6599 (B)	
	*Methyclothiazide			Aquatensen,
34871	5mg Tablet	0.3689	.4120 (B)	
	Methyldopa			Aldomet
01430	125mg Tablet		.0615 (M)	Deleted 12/07/00
01431	250mg Tablet	0.1013	.0773 (M)	
01432	500mg Tablet	0.1800	.1335 (M)	
	Methyldopa; Hydrochlorothiazide (see listing under H)			
	Methylphenidate Hydrochloride			Ritalin
15913	5mg Tablet	0.3020	.2877 (B)	
15911	10mg Tablet	0.4224	.4023 (B)	
15920	20mg Tablet	0.6180	.5886 (B)	
	Methylprednisolone			Medrol
27056	4mg Tablet	0.4658	.4436 (B)	
	Metoclopramide HCl			Reglan
21021	5mg Tablet	0.1200	.0987 (B)	
21020	10mg Tablet	0.0195	.0188 (B)	
03610	*5mg/5ml Solution, 480ml, pe	0.0155		
	Metoprolol Tartrate			Lopressor
20642	50mg Tablet	0.1060	.0645 (B)	
20641	100mg Tablet	0.1290	.0878 (B)	
	Metronidazole			Flagyl, Protostat
43031	250mg Tablet	0.0640	.0823 (B)	
43032	500mg Tablet	0.1350	.1669 (B)	
	Mexiletine HCL			Mexitil
12210	150mg Capsule	0.6452	.8223 (B)	
12211	200mg Capsule	0.7784	.9795 (B)	
12212	250mg Capsule	0.8588	1.1376 (B)	
	Minocycline HCl			Minocin
40411	50mg Capsule	0.5020	.4043 (B)	
40410	100mg Capsule	0.7875	.8085 (B)	
	Minoxidil			Loniten
01291	2.5mg Tablet	0.3170	.1095 (B)	
01290	10mg Tablet	0.6970	.1437 (B)	
	Nadolol			Corgard
20654	20mg Tablet	0.4650	.4725 (B)	
20652	40mg Tablet	0.5780	.5093 (B)	
20653	+80mg Tablet	0.6593	.6593 (B)	
20650	*120mg Tablet	1.1220		
20651	*160mg Tablet	1.1540		
17070	*Naltrexone HCL Tablet, 60	3.6000		Revia
	Naphazoline HCl			Albalon,
32252	0.1% Oph Soln, 15ml	4.71	4.72 (B)	Naphcon Forte, Vas
	Naproxen			Naprosyn
35790	250mg Tablet	0.1035	.1215 (B)	
35792	375mg Tablet	0.1335	.2142 (B)	
35793	500mg Tablet	0.1628	.1823 (B)	
61850	*375mg Tablet ER	0.6450		
61851	*500mg Tablet ER	0.9750		

*New Addition

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** No Idaho Coverage

ID004079

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Naproxen Sodium				
47130	275mg Tablet	0.1670	.1407 (B)	Anaprox
47131	550mg Tablet	0.2070	.2195 (B)	
Neomycin Sulfate; Dexamethasone (see listing under D)				
Neomycin Sulfate; Polymyxin B Sulfate; Bacitracin Zinc (see listing under B)				
Neomycin Sulfate; Polymyxin B Sulfate; Dexamethasone (see listing under D)				
Neomycin Sulfate; Polymyxin B Sulfate; Hydrocortisone Otic (see listing under H)				
** Niacin (OTC)				
94881	500mg Tablet	0.0390	.0299 (M)	
*Nicardipine HCL				
02390	20mg Capsule	0.3380		Cardene
02391	30mg Capsule	0.4050		
Nifedipine				
02350	10mg Capsule		.0897 (B) Deleted 12/07/00	Adalat, Procardia
02351	20mg Capsule	0.2470	.1735 (B)	
Nitrofurantoin, Macrocrystalline				
41822	50mg Capsule	0.5040	.5084 (B) Macrobid	Macrobid
41820	100mg Capsule	0.7425	.8184 (B)	
Norethindrone; Ethynyl Estradiol (see listing under E)				
Norethindrone; Mestranol (see listing under M)				
Nortriptyline HCl				
15280	10mg Capsule	0.1020	.0986 (B)	Aventyl, Pamelor
15281	25mg Capsule	0.1580	.1495 (B)	
15283	50mg Capsule	0.1720	.1830 (B)	
15282	75mg Capsule	0.2204	.2342 (B)	
Nystatin				
500,000 units				
42452	Oral Tablet	0.3563	.1193 (B)	Mycostatin,
100,000 units/ml				
42440	Oral Susp			
	60ml	0.0620	2.12 (B)	
	480ml	0.0425	.0354 (B)	
30140	Cream, Topical 100,000 units/gm			
	15gm, per gm	0.0900	.0970 (B)	
	30gm, per gm	0.0760	.0725 (B)	
30150	Ointment, Topical 100,000units/gm			Deleted 12/07/00
	= or <15gm, per gm		.0970 (B)	
	>15gm, per gm		.1200 (B)	
Nystatin; Triamcinolone Acetonide				
100,000 units/gm; 0.1%				
84090	Cream, Topical			Mycolog II,
	15gm	1.49	1.47 (B)	
	30gm	2.82	2.87 (B)	
	60gm, per gm	0.0747	.0732 (B)	
84110	Ointment, Topical			
	15gm	1.49	1.48 (B)	
	30gm	2.93	2.92 (B)	
	60gm, per gm	0.0747	.0800 (B)	
Oxacillin Sodium				
39151	250mg/5ml Oral Susp, 100ml		5.25 (B) Deleted 12/07/00	Bactocill, Prostaphia
Oxazepam				
14230	10mg Capsule	0.3100	.0593 (B)	Serax
14231	15mg Capsule	0.5160	.0683 (B)	
14232	30mg Capsule	1.1200	.0893 (B)	
Oxybutynin Chloride				
19380	5mg Tablet	0.1650	.1463 (B)	Ditropan

Oxycodone HCl; Acetaminophen (see listing under A)

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Oxycodone HCl; Aspirin (see listing under A)

** No Idaho Coverage

ID004080

MEDICAID MAXIMUM ALLOWABLE COSTS					
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME	
	Pencillin V Potassium			Pen-Vee K,	
39053	250mg Tablet	0.0491	.0578 (B)	V-Cillin K	
39055	500mg Tablet	0.0800	.0818 (B)		
39022	125mg/5ml Oral Susp				
	100ml		2.18 (B)	Deleted 12/07/00	
	200ml	2.40	2.62 (B)		
39024	250mg/5ml Oral Susp,				
	100ml	2.20	2.46 (B)		
	200ml	3.40	3.76 (B)		
	*Pentoxifylline			Trental	
11800	400mg Tablet ER	0.3150			
	Perphenazine			Trilafon	
14651	2mg Tablet	0.2550	.2093 (B)		
14652	4mg Tablet	0.3150	.2843 (B)		
14653	8mg Tablet	0.4290	.3293 (B)		
14650	16mg Tablet	0.6000	.6713 (B)		
	Perphenazine; Amitriptyline (see listing under A)				
	Phendimetrazine Tartrate			Brontril SR, Adipost	
20852	35mg Tablet		.0760 (R)	Deleted 12/07/00	
	** Phentermine HCl			Fastin	
20892	30mg Capsule		.0975 (B)		
20893	37.5mg Capsule		.1403 (R)		
20713	37.5mg Tablet		.1818 (R)	Deleted 12/07/00	
	Phenylephrine HCl; Promethazine HCl			Phenergan VC	
52370	5mg-6.25mg/5ml Syrup				
	480ml, per ml	0.0092	.0083 (B)		
	Pindolol			Visken	
20681	5mg Tablet	0.1540	.1343 (B)		
20680	10mg Tablet	0.1970	.1725 (B)		
	Piroxicam			Feldene	
35820	10mg Capsule	0.1090	.0788 (B)		
35821	20mg Capsule	0.1480	.0830 (B)		
	*Polymixin B Sulf; Trimethoprim Sulf.			Polytrim	
87300	10,000 units/ml Eq. 1mg/base/ml				
	Sol/Drops OP, 10ml, per ml	1.2360			
	Potassium Chloride			Klor-Con 8, Slow K	
03514	8mEq. (600mg) Tablet SR	0.0773	.0765 (B)	Klor-Con 10, K-Dur	
	*+10mEq. (800mg) Tablet	0.1300		Micro-K 10, K-Tab	
	Prazosin HCl			Minipress	
01250	1mg Capsule	0.0580	.0698 (B)		
01251	2mg Capsule	0.0790	.0720 (B)		
01252	5mg Capsule	0.1380	.1388 (B)		
	*Prednisolone			Prelone	
26800	15mg/5ml Syrup, 240ml, per	0.2580			
	15mg/5ml Syrup, 480ml, per	0.2090			
	Prednisolone Acetate			Econopred Plus,	
33153	1% Suspension/Drops, OP			Pred Forte	
	5ml	9.45	9.45 (M)		
	*10ml	16.20			
	15ml		24.30 (M)	Deleted 12/07/00	
	Prednisolone Sodium Phosphate			Inflamase Forte,	
33181	1% OP Soln,			AK-Pred	
	5ml	9.60	6.09 (B)		
	15ml		5.62 (B)	Deleted 12/07/00	
	Prednisolone Sodium Phosphate; Sulfacetamide Sodium			Vasocidin	
86903	0.25%; 10% OP Soln,				
	5ml		11.16 (B)		
	10ml		13.04 (B)	Deleted 12/07/00	

*New Addition

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** No Idaho Coverage

ID004081

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Prednisone				
				Deltasone
27176	5mg Tablet	0.0332	.0240 (B)	
27172	10mg Tablet	0.0550	.0449 (B)	
27174	20mg Tablet	0.0760	.0720 (B)	
27177	50mg Tablet		.2083 (B)	Deleted 12/07/00
Primidone (no P.A. for Brand)				
				Mysoline
17321	250mg Tablet	0.3610	.2816 (B)	
Probenicid				
				Benemid
35072	500mg Tablet	0.7080	.1200 (B)	
Procainamide HCl				
				Pronestyl
01093	375mg Capsule			Deleted 12/07/00
EXTENDED RELEASE				
01121	*500mg Tablet SR	0.2460	.1635 (B)	
01122	+750mg Tablet SR	0.3000	.2475 (B)	
Prochlorperazine Maleate				
				Compazine
14773	5mg Tablet	0.3986	.5392 (B)	
14771	10mg Tablet	0.5766	.8093 (B)	
Promethazine HCl				
				Phenergan Plain
15035	*6.25mg/5ml Syrup, 120ml, p	0.0219		
	6.25mg/5ml Syrup, 480ml, p	0.0079	.0078 (B)	
Promethazine HCl; Codeine Phosphate Syrup (see listing under C)				
Promethazine HCl; Dextromethorphan HBr Syrup (see listing under D)				
Promethazine HCl; Phenylephrine HCl Syrup (see listing above)				
Promethazine HCl; Phenylephrine HCl; Codeine Phosphate Syrup (see listing under C)				
Proparacaine HCl				
				Ophthalmic
32850	.5% Oph Soln/Drops, 15ml,	0.4990	.4990 (B)	
Propoxyphene HCl				
				Darvon
16481	65mg Capsule	0.1350	.0488 (B)	
Propoxyphene HCl; Acetaminophen (see listing under A)				
Propoxyphene HCl; Aspirin; Caffeine (see listing under A)				
Propoxyphene Napsylate; Acetaminophen (see listing under A)				
Propranolol HCl				
				Inderal
20630	10mg Tablet	0.0500	.0116 (B)	
20631	20mg Tablet	0.0410	.0135 (B)	
20632	40mg Tablet	0.0490	.0204 (B)	
20633	60mg Tablet		.0327 (B)	Deleted 12/07/00
20634	80mg Tablet	0.0530	.0322 (B)	
Extended Release				
				Inderal LA
03233	60mg Capsule		.4163 (B)	
03230	80mg Capsule		.4725 (B)	
03231	120mg Capsule		.6188 (B)	
03232	160mg Capsule		.8243 (B)	Deleted 12/07/00
Propranolol HCl; Hydrochlorothiazide (see listing under H)				
OTC - COVERED ONLY AS INGREDIENT IN RX COMPOUNDED FORMULATION				
Pseudoephedrine HCl; Triprolidine HCl				
				Sudafed
96445	60mg; 2.5mg Tablet		.0273 (B)	Deleted 12/07/00
Quinidine Gluconate				
				Quinaglute
01011	324mg Tablet SR	0.4200	.5118 (B)	
Quinidine Sulfate				
				Cin-Quin
01053	200mg Tablet		.0962 (B)	Quinora
01055	300mg Tablet		.1493 (B)	Deleted 12/07/00
Ranitidine Hydrochloride				
				Zantac
10200	*150mg Tablet	0.3410		
10201	300mg Tablet	0.6830	1.1143 (B)	

*New Addition

+SMAC

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** No Idaho Coverage

ID004082

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
	*Salsalate			Disalcid
16801	500mg Tablet	0.1000		
16802	750mg Tablet	0.1000		
	Selegiline HCL			Eldepryl
15600	5mg Tablet, 60	0.8230	.8300 (B)	
	5mg Tablet, 500		1.75 (R)	Deleted 12/07/00
	Selenium Sulfide			Selsun, Exsel
24341	2.5% Lotion/Shampoo Topical 120ml	4.20	3.16 (R)	
	Silver Sulfadiazine			Silvadene, Flint SDD
31630	+1% Cream, 20gm	3.39	3.39 (B)	Thermazene
	+1% Cream, 50gm	5.65	5.55 (B)	
	+1% Cream, 85gm	9.93	9.93 (B)	
	+1% Cream, 400gm	25.40	25.40 (B)	
	Spironolactone			Aldactone
27691	25mg Tablet	0.3000	.3351 (B)	
	Spironolactone; Hydrochlorothiazide (see listing under H)			
	*Sucralfate			Carafate
08200	1gm Tablet	0.3690		
	Sulfacetamide Sodium			Sodium Sulamyd, Isopto Cetamide, Bleph-10
33330	10% OP Oint, 3.5gm	5.09	5.09 (R)	
	10% OP Soln.			
	2ml		1.56 (B)	
	5ml		1.81 (B)	Deleted 12/07/00
	15ml	1.86	1.45 (B)	
	Sulfacetamide Sodium; Prednisolone Sodium Phosphate (see listing under P)			
	Sulfamethoxazole; Trimethoprim			Bactrim, Septra
90161	400mg; 80mg Tablet	0.1325	.0612 (B)	
90163	800mg; 160mg DS Tablet	0.2070	.0893 (B)	
90150	200mg-40mg/5ml			
	Oral Susp., 480ml per ml	0.0230	.0224 (B)	
	Oral Susp., 473ml per ml		.0459 (B)	Deleted 12/07/00
	Sulfasalazine			Azulfidine
41611	500mg Tablet	0.1403	.1425 (B)	
	Sulfinpyrazone			Anturane
35081	200mg Capsule		.1643 (B)	Deleted 12/07/00
	Sulfisoxazole			Gantrisin
41493	500mg Tablet		.0788 (B)	Deleted 12/07/00
	Sulindac			Clinoril
35800	150mg Tablet	0.2138	.1754 (B)	
35801	200mg Tablet	0.3500	.2331 (B)	
	Temazepam			Restoril
13840	15mg Capsule	0.1300	.0628 (B)	
13841	30mg Capsule	0.1560	.0780 (B)	
	Tetracycline HCl			Sumycin, Achromycin
40072	250mg Capsule		.0375 (B)	Deleted 12/07/00
40073	500mg Capsule	0.0650	.0578 (B)	
	Theophylline Anhyd			Theo-Dur, Theocron
	EXTENDED RELEASE			Theolair-SR, Slo-Ph
00352	80mg/15ml Elixir, 480 ml, pe	0.0070	.0055 (B)	
00410	100mg Tablet		.0480 (B)	
00411	200mg Tablet	0.0940	.0620 (B)	
00413	300mg Tablet	0.1070	.0815 (B)	
00416	*450mg Tablet	0.2700		

*New Addition

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** No Idaho Coverage

ID004083

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Thioridazine HCl				
14882	10mg Tablet	0.0939	.0352 (B)	Mellaril
14884	15mg Tablet		.0459 (B)	Deleted 12/07/00
14880	25mg Tablet	0.1103	.0497 (B)	
14881	50mg Tablet	0.1760	.0663 (B)	
14883	100mg Tablet	0.2324	.1156 (B)	
14885	150mg Tablet		.1928 (B)	
14886	200mg Tablet		.2406 (B)	
14861	30mg/ml Oral Conc., per ml		.1013 (B)	Deleted 12/07/00
14860	*100mg/ml Oral Conc., 120ml	0.2376		
Thiothixene				
15690	1mg Capsule	0.0890	.1343 (B)	Navane
15692	2mg Capsule	0.1190	.1658 (B)	
15694	5mg Capsule	0.1690	.2012 (B)	
15691	10mg Capsule	0.2289	.3326 (B)	
Thiothixene HCl				
15680	5mg/ml Oral Conc., per ml	0.2828	.2094 (B)	Navane Deleted 12/07/00
Timolol Maleate				
20672	5mg Tablet	0.1538	.1832 (B)	Blocadren
20670	10mg Tablet	0.2138	.2568 (B)	
20671	20mg Tablet		.5241 (B)	Deleted 12/07/00
32820	0.25% Sol./Drops, OP, 5ml	3.75	9.23 (B)	
	10ml	7.97	12.15 (B)	
	15ml	11.25	18.23 (B)	
32821	0.5% Sol./Drops, OP, 5ml	7.04	11.55 (B)	
	10ml	10.31	15.20 (B)	
	15ml	15.00	15.38 (B)	
Tobramycin				
33630	0.3% Opth Soln., 5ml	3.84	4.04 (B)	Tobrex
Tolazamide				
05741	250mg Tablet	0.1038	.1166 (B)	Tolinase
05742	500mg Tablet	0.2480	.3064 (B)	
Tolbutamide				
05724	500mg Tablet		.2892 (B)	Orinase Deleted 12/07/00
Tolmetin Sodium				
35770	400mg Capsule	0.7280	.2625 (B)	Tolectin
35781	600mg Tablet	0.9098	.9195 (B)	
Trazodone HCl				
15401	50mg Tablet	0.0640	.0643 (B)	Desyrel
15400	100mg Tablet	0.0852	.0975 (B)	
15402	150mg Tablet	0.4280	.4943 (B)	
Triamcinolone Acetonide				
31231	.025% Cream, Topical 15gm	0.0950	.0650 (B)	Aristocort, Kenalog
53441	.025% Cream, Topical 80gm		.0300 (M)	Deleted 12/07/00
31231	*.025% Cream, Topical 454g	0.0132		
31232	.1% Cream, Topical 15gm	0.0810	.0670 (B)	
	.1% Cream, Topical 80gm	0.0420	.0302 (B)	
	.1% Cream, Topical 454gm	0.0295	.0314 (M)	
	.1% Cream, Topical 2270gm		.0271 (M)	Deleted 12/07/00
31232	.5% Cream, Topical 15gm	0.1889	.1300 (B)	
31232	.1% Lotion, Topical 60ml	0.1215	.1150 (B)	
31241	.025% Ointment, Topical 15gm		.0580 (B)	
	.025% Ointment, Topical 80gm		.0407 (B)	Deleted 12/07/00
31242	.1% Ointment, Topical 15gm	0.0810	.0750 (B)	
	*.1% Ointment, Topical 80gm	0.0502		
	.1% Ointment, Topical 454g	0.0381	.0314 (M)	
31870	.1% Paste, Dental 5gm	0.8250	.7650 (B)	
Triamcinolone Acetonide; Nystatin (see listing under N)				
Triamterene; Hydrochlorothiazide (see listing under H)				
Triazolam				
14282	0.125mg Tablet	0.4000	.4842 (B)	Halcion
14280	+0.25mg Tablet	0.4000	.5286 (B)	

*New Addition

+SMAC

18

** No Idaho Coverage

ID004084

MEDICAID MAXIMUM ALLOWABLE COSTS				
GENERIC CODE	GENERIC NAME	12/07/00 LIMIT/UNIT	09/01/98 LIMIT/UNIT	COMMONLY KNOWN BRAND NAME
Trifluoperazine HCl				Stelazine
14830	1mg Tablet	0.2433	.3207 (B)	
14832	2mg Tablet	0.3552	.4683 (B)	
14833	5mg Tablet	0.4271	.5631 (B)	
14831	10mg Tablet	0.5400	.7133 (B)	
Trihexyphenidyl HCl				Artane
17563	5mg Tablet		.1424 (R)	Deleted 12/07/00
Trimethoprim				Trimex
42200	100mg Tablet	0.1553	.1493 (B)	
42201	200mg Tablet		.2210 (B)	Deleted 12/07/00
Trimethoprim; Sulfisoxazole (see listing under S)				
Triprolidine HCl; Pseudoephedrine HCl; Codeine Phosphate Syrup (see listing under C)				
Triple Sulfa (sulfabenzamide, sulfacetamide, sulfathiazole) 3.7%, 2.86%, 3.42%				Sultrin
83199	+Vaginal Cream, 78gm, p	0.0800	.0688 (B)	
Tropicamide				Mydracyl
33020	0.5% OP Soln., 15ml	9.82	8.93 (M)	
33021	1% OP Soln., 15ml	10.50	9.38 (M)	
Valproate Sodium (no P.A. on Brand)				Depakene
17280	250mg Base/5ml Syrup, per	0.0670	.0594 (M)	
Valproic Acid (no P.A. on Brand)				Depakene
17270	250mg Capsule	0.2100	.1178 (B)	
Verapamil HCl				Calan, Isoptin
47110	40mg Tablet	0.1840	.1464 (B)	
02342	80mg Tablet	0.0620	.0480 (B)	
02341	120mg Tablet	0.0860	.0800 (B)	
EXTENDED RELEASE				Calan SR, Isoptin S
32472	+120mg Tablet SR	0.7000	1.1573 (R)	
32471	180mg Tablet SR	0.2352	.2888 (B)	
32470	240mg Tablet SR	0.2175	.3113 (B)	
03003	*120mg Capsule ER	0.8250		
03001	*180mg Capsule ER	0.8700		
03002	*240mg Capsule ER	0.9900		
*Warfarin Sodium (no P.A. on Brand)				Coumadin
25792	1mg Tablet	0.4361		
25791	2mg Tablet	0.4553		
25794	2.5mg Tablet	0.4692		
25796	3mg Tablet	0.4718		
25797	4mg Tablet	0.4724		
25793	5mg Tablet	0.4761		
25798	6mg Tablet	0.6752		
25795	7.5mg Tablet	0.6981		
25790	10mg Tablet	0.7244		



STATE OF IDAHO

DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF BENEFIT PAYMENTS

DIVISION OF WELFARE
Statehouse
Boise, Idaho 83720

November 24, 1982

PHARMACY INFORMATION RELEASE PH82-5

TO: ALL PHARMACISTS

FROM: Dianne B. Onnen, R.Ph., M.P.A., Pharmacy Consultant
Medical Assistance Section *Dianne B. Onnen*

SUBJECT: 1. Suspension of MAC on Erythromycin 500 mg
Tablets
2. Drixoral
3. Prescriber Codes

1. Effective November 19, the Federal Maximum Allowable Cost limit on Erythromycin 500 mg tablets has been suspended; however, a new limit may be considered by the Pharmaceutical Reimbursement Board in Baltimore.
2. Effective December 6, Drixoral will not be eligible for Medicaid payment since it is now an over-the-counter drug.
3. For your convenience, I am enclosing updated provider license numbers to be included in the "prescriber code" box on the Medicaid Pharmacy Claim forms (DHW D3-80).

Thank you for your participation and cooperation.

DBO/sc

Enclosure

EQUAL OPPORTUNITY EMPLOYER

ID011889



Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: All Pharmacy Providers Participating in the Virginia
Medical Assistance Program

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO Special
DATE 10/15/2004

SUBJECT: Maximum Allowable Cost (MAC) Program for Virginia Medicaid and
Notification of COX-II Drug Class Changes to Preferred Drug List
(PDL)

The purpose of this memorandum is to inform you of the new Maximum Allowable Cost (MAC) program for Virginia Medicaid's fee-for-service program, and describe the most recent COX-II drug class changes. Effective December 1, 2004, the reimbursement for multiple-source generic drugs will be subject to a new maximum allowable cost. This program works together with the Mandatory Generic program and the Preferred Drug List (PDL) to ensure recipients are receiving quality products in a cost-effective manner. This does not affect the Managed Care Organizations (MCOs), which have their own pharmacy benefits and programs. Please note that the Long Acting Narcotic Drug Class will be addressed soon in a forthcoming memo.

MAXIMUM ALLOWABLE COSTS (MAC)

Currently, the Virginia Medicaid fee-for-service program reimburses pharmacies based on the lowest of the following pricing methodologies:

- Federal Upper Limit (FUL);
- 75th percentile cost level (VMAC) for multi-source drugs;
- 60th percentile cost level for unit-dose multi-source drugs (VMAC);
- Average Wholesale Price (AWP)-10.25%; and
- Pharmacy's Usual and Customary.

Often, however, pharmacies can purchase multiple-source generic drugs for far less than the current VMAC program amount. Thus, Medicaid is paying a much higher level of reimbursement relative to the acquisition cost for these drugs. By instituting a new MAC reimbursement methodology for multiple-source generic drugs, DMAS will reimburse

Medicaid Memo: Special
October 15, 2004
Page 2

pharmacies an amount that more accurately reflects their acquisition costs. According to the 2004 General Assembly Appropriations Act, the MAC reimbursement shall be no less than 110 percent of the lowest-published wholesale acquisition cost (WAC) for products widely available for purchase in Virginia and included in the national pricing compendia.

The new MAC reimbursement amount will be determined by and based on the market prices for each drug in accordance with the following guidelines:

- 1) There must be at least three different suppliers (manufacturers and/or wholesalers) that are able to supply the drug and from whom pharmacies are able to purchase sufficient quantities of the drug. The drugs considered must be listed as therapeutically and pharmaceutically equivalent in the FDA's most recent version of the "Orange Book."
- 2) If the drug has a Federal Upper Limit (FUL), the pricing methodology will determine whether the MAC rate is lower than the FUL for that drug. If the MAC rate is higher than the FUL, the lower price will be paid.
- 3) The list of state MAC rates will be available to pharmacy providers via our website at www.dmas.virginia.gov under "Pharmacy Services." We have also enclosed a MAC list with this memo. This list will be updated on a monthly basis by the first Friday of every month and will contain a column with the effective dates of MAC prices.
- 4) DMAS will publish the factors used to set state MAC rates, including:
 - the identity of the reference product used to set the MAC rate;
 - the generic code number (GCN) of the reference product;
 - the difference by which the MAC rate exceeds the reference product price, which will be no less than 110 percent of the lowest-published wholesale acquisition cost (WAC) for products widely available for purchase in Virginia and included in the national pricing compendia; and
 - the identity and date of the published compendia used to determine the reference product and set the MAC rate.

By using this revised MAC reimbursement methodology, pharmacies are encouraged to purchase the most cost-effective, therapeutically-equivalent generic drug.

PRICING DISPUTE RESOLUTION PROCESS

The intent of the MAC (maximum allowable cost) program is to reimburse pharmacy providers fairly, based on accurate generic drug costs. If a pharmacy provider discovers that the MAC price does not accurately reflect the drug cost, the provider should first explore alternative manufacturers or wholesalers that more accurately reflect the MAC price. If there are no manufacturers or wholesalers that are at or below the established MAC price, the providers may request a review.

Medicaid Memo: Special
October 15, 2004
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As of November 1, 2004, providers may call 866-312-8467, fax the attached form to 866-312-8470, or email disputeresolution@dmass.virginia.gov with MAC pricing dispute resolution requests providing the following information:

- Pharmacy name, phone number, fax number, and provider number
- Date requested
- Drug name, strength and dosage form
- NDC number
- Wholesale acquisition cost
- Package size

Providers may administer a 72-hour supply of the medication for the patient while the dispute is being resolved.

Providers will be notified of the receipt of their dispute resolution request within one business day. The provider will receive a decision within three business days. The provider will either receive a notice stating that there is confirmation of alternative manufacturers, who have the product available at or below the MAC price, or the MAC price will be adjusted accordingly based on the results of the review. The revised price will be effective from the date of the dispute resolution request. The MAC list will be updated monthly by the first Friday of every month and can be found and downloaded from our website at www.dmass.virginia.gov.

MAC CALL CENTER

The MAC Call Center can be reached at 866-312-8467 if you have any questions regarding the MAC program. The call center will be operational as of November 1, 2004; Monday through Friday from 9 a.m. to 5 p.m. Voicemail capabilities will be available for after-hours calls. You may also send questions via email to disputeresolution@dmass.virginia.gov.

PREFERRED DRUG LIST (PDL) – CHANGES TO COX-II DRUG CLASS

Merck & Co. removed Vioxx from the market due to recent studies showing an increased risk of cardiovascular problems associated with taking the drug. As a result, DMAS has made changes to the PDL specific to the COX-II drug class and taken immediate steps to allow the other two drugs (Celebrex and Bextra) in the COX-II drug class to be “preferred” drugs. The clinical edit that has been in place requiring patients to try two Non-steroidal Anti-inflammatory Drugs (NSAIDs) before approval of a COX-II drug is still in place. Again, Celebrex and Bextra are “preferred” drugs in the COX-II class until December 31, 2004. On October 6, 2004, the P&T committee’s annual review of Phase-I PDL drugs decided that, as of January 1, 2005, Celebrex will remain a “preferred” drug and Bextra will revert back to a “non-preferred” drug. Please counsel your patients on Bextra accordingly. A Medicaid Memo will be distributed in December addressing the changes to the PDL Phase-I drug categories that will be effective as of January 1, 2005.

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October 15, 2004
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ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option to access information regarding Medicaid eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification information. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 800-884-9730 or 800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its provider manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov (*please note the new DMAS website address*). Refer to the Provider Column to find Medicaid- and SLH-provider manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet, or would like a paper copy of a manual, you can order these by contacting Commonwealth-Martin at 804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

"HELPLINE"

The "HELPLINE" is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays, to answer questions. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long-distance
1-800-552-8627	All other areas (in-state long-distance, toll-free)

Please remember that the "HELPLINE" is for provider use only.

Attachments (2)



Virginia Medicaid
MAXIMUM ALLOWABLE COST (MAC)
Dispute Resolution Request Form

The intent of the MAC (maximum allowable cost) program is to reimburse pharmacy providers fairly based on accurate drug costs. If a provider discovers that the MAC price does not accurately reflect the drug cost, the provider should first explore alternative manufacturers or wholesalers that more accurately reflect the MAC price. If there are no manufacturers or wholesalers that are at or below the established MAC price, the providers may request a review for resolution. **Please fax this completed form along with a copy of the purchase invoice to 866-312-8470.** All information will be researched and the appropriate action will be taken. Incomplete requests will be returned for additional information. If you wish to contact us by phone or cannot fax us, please call 1-866-312-8467 or email us at disputeresolution@dmas.virginia.gov.

Use this form for MAC dispute resolution requests only.

Pharmacy Name: _____ Phone: _____ FAX: _____

Pharmacy Provider number: _____ Date Requested: _____

Drug Name: _____ Strength: _____

Dosage Form: _____ NDC number: _____

Wholesale Acquisition Cost: _____ Package Size: _____

Providers will either receive a notice stating that there has been confirmation of alternative manufacturers, who have the product available at or below the MAC price, or the MAC price will be adjusted accordingly to reflect the acquisition price. This adjustment will be effective as of the date of the request. Providers will be notified of the receipt of their dispute resolution request within one business day. The provider will receive resolution to and a decision on their dispute within three business days. The MAC list will be updated monthly and can be found and downloaded from our website at www.dmas.virginia.gov.

DMAS-176

BATES STAMP NO

000000030

JDVA000000030

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	ACEBUTOLOL 200MG CAPSULE	26460	\$0.4612	\$0.3075	\$0.3260	\$0.0185	10-12-2004
	ACEBUTOLOL 400MG CAPSULE	26461	\$0.6713	\$0.4475	\$0.4744	\$0.0269	10-12-2004
	ACETAMINOPHEN/COD #2 TABLET	70131	\$0.1500	\$0.1000	\$0.1100	\$0.0100	10-12-2004
	ACETAMINOPHEN/COD #3 TABLET	70134	\$0.2137	\$0.1425	\$0.1568	\$0.0143	10-12-2004
	ACETAMINOPHEN/COD #4 TABLET	70136	\$0.2812	\$0.2660	\$0.2820	\$0.0160	10-12-2004
	ACETAMINOPHEN/COD ELIXIR	55401	\$0.0000	\$0.0233	\$0.0257	\$0.0023	10-12-2004
	ACETAZOLAMIDE 125MG TABLET	34721	\$0.0000	\$0.1000	\$0.1100	\$0.0100	10-12-2004
	ACETIC ACID 0.25% IRRIG.	45390		\$0.0175	\$0.0192	\$0.0017	10-12-2004
	ACETYLCYSTEINE 10% VIAL	02400	\$0.0000	\$1.0625	\$1.1688	\$0.1063	10-12-2004
	ACETYLCYSTEINE 20% VIAL	02401	\$0.0000	\$1.3125	\$1.4438	\$0.1313	10-12-2004
	ACYCLOVIR 200MG CAPSULE	43790	\$0.1478	\$0.1228	\$0.1302	\$0.0074	10-12-2004
	ACYCLOVIR 400MG TABLET	13724	\$0.4425	\$0.2384	\$0.2527	\$0.0143	10-12-2004
	ACYCLOVIR 800MG TABLET	13721	\$0.8700	\$0.4636	\$0.4914	\$0.0278	10-12-2004
	ADENOSINE 3MG/ML VIAL	35350		\$14.7400	\$15.6244	\$0.8844	10-12-2004
	ALBUTEROL 0.83MG/ML SOLUTION	41681	\$0.1450	\$0.0667	\$0.1450	\$0.0783	10/12/2004
	ALBUTEROL 5MG/ML SOLUTION	41680	\$0.3360	\$0.2240	\$0.2374	\$0.0134	10-12-2004
	ALBUTEROL 90MCG INHALER	20110	\$0.8823	\$0.4412	\$0.4853	\$0.0441	10-12-2004
	ALBUTEROL SULF 2MG/5ML SYRP	22780	\$0.0000	\$0.0584	\$0.0643	\$0.0058	10-12-2004
	ALBUTEROL SULFATE 2MG TAB	20100	\$0.0000	\$0.0665	\$0.0732	\$0.0067	10-12-2004
	ALBUTEROL SULFATE 4MG TAB	20101	\$0.1425	\$0.0950	\$0.1045	\$0.0095	10-12-2004
	ALLOPURINOL 100MG TABLET	07070	\$0.0784	\$0.0591	\$0.0626	\$0.0035	10-12-2004
	ALLOPURINOL 300MG TABLET	07071	\$0.1671	\$0.1159	\$0.1275	\$0.0116	10-12-2004
	ALPRAZOLAM 0.25MG TABLET	14260	\$0.0614	\$0.0480	\$0.0509	\$0.0029	10-12-2004
	ALPRAZOLAM 0.5MG TABLET	14261	\$0.0698	\$0.0520	\$0.0551	\$0.0031	10-12-2004
	ALPRAZOLAM 1MG TABLET	14262	\$0.0885	\$0.0590	\$0.0649	\$0.0059	10-12-2004
	ALPRAZOLAM 2MG TABLET	14263	\$0.1745	\$0.1560	\$0.1654	\$0.0094	10-12-2004
	AMANTADINE 50MG/5ML SYRUP	17530	\$0.0656	\$0.0379	\$0.0417	\$0.0038	10-12-2004
	AMIKACIN 250MG/ML VIAL	41202		\$3.2500	\$3.4450	\$0.1950	10-12-2004
	AMIKACIN 50MG/ML VIAL	41201		\$3.2500	\$3.5750	\$0.3250	10-12-2004
	AMILORIDE HCL/HCTZ 5/50 TAB	82341	\$0.0675	\$0.0475	\$0.0504	\$0.0029	10-12-2004
	AMINOCAPROIC ACID 250MG/ML	25570		\$0.1075	\$0.1140	\$0.0065	10-12-2004
	AMIODARONE 200MG TABLET	10920	\$1.6875	\$1.2608	\$1.3364	\$0.0756	10-12-2004
	AMIODARONE HCL INJECTION	17795		\$1.6500	\$1.8150	\$0.1650	10-12-2004
	AMITRIPT/CDP 25-10 TABLET	16684	\$0.0000	\$0.7000	\$0.7700	\$0.0700	10-12-2004
	AMITRIPTYLINE HCL 100MG TAB	16513	\$0.1500	\$0.1432	\$0.1518	\$0.0086	10-12-2004
	AMITRIPTYLINE HCL 10MG TAB	16512	\$0.0608	\$0.0438	\$0.0464	\$0.0026	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

Page: 1

BATES STAMP NO

000000031

JDVA000000031

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	AMITRIPTYLINE HCL 150MG TAB	16514	\$0.2430	\$0.2181	\$0.2312	\$0.0131	10-12-2004
	AMITRIPTYLINE HCL 25MG TAB	16515	\$0.0653	\$0.0624	\$0.0661	\$0.0037	10-12-2004
	AMITRIPTYLINE HCL 50MG TAB	16516	\$0.0666	\$0.0505	\$0.0556	\$0.0051	10-12-2004
	AMITRIPTYLINE HCL 75MG TAB	16517	\$0.1425	\$0.1095	\$0.1161	\$0.0066	10-12-2004
	AMOX TR-K CLV 200-28.5 SUSP	67154		\$0.2768	\$0.3045	\$0.0277	10-12-2004
	AMOX TR-K CLV 400-57.5 SUSP	67153		\$0.5272	\$0.5799	\$0.0527	10-12-2004
	AMOX TR-K CLV 500-125MG TAB	67071		\$2.7250	\$2.9975	\$0.2725	10-12-2004
	AMOX TR-K CLV 875-125MG TAB	67076		\$3.6370	\$4.0007	\$0.3637	10-12-2004
	AMOXICILLIN 125MG TAB CHEW	39650		\$0.1000	\$0.1100	\$0.0100	10-12-2004
	AMOXICILLIN 125MG/5ML SUSP	39681	\$0.0201	\$0.0156	\$0.0166	\$0.0009	10-12-2004
	AMOXICILLIN 250MG CAPSULE	39660	\$0.0636	\$0.0498	\$0.0528	\$0.0030	10-12-2004
	AMOXICILLIN 250MG TAB CHEW	39651	\$0.0000	\$0.2000	\$0.2120	\$0.0120	10-12-2004
	AMOXICILLIN 250MG/5ML SUSP	39683	\$0.0281	\$0.0206	\$0.0219	\$0.0012	10-12-2004
	AMOXICILLIN 500MG CAPSULE	39661	\$0.1272	\$0.1001	\$0.1061	\$0.0060	10-12-2004
	AMOXICILLIN 875MG TABLET	39632		\$0.6395	\$0.7035	\$0.0640	10-12-2004
	AMPHETAMINE SALTS 10MG TAB	56971		\$0.9921	\$1.0516	\$0.0595	10-12-2004
	AMPHETAMINE SALTS 20MG TAB	56973		\$0.9921	\$1.0516	\$0.0595	10-12-2004
	AMPHETAMINE SALTS 30MG TAB	56972		\$0.9921	\$1.0516	\$0.0595	10-12-2004
	AMPHETAMINE SALTS 5MG TAB	56970		\$0.9921	\$1.0516	\$0.0595	10-12-2004
	AMPICILLIN 500MG CAPSULE	39272	\$0.2991	\$0.1994	\$0.2193	\$0.0199	10-12-2004
	AMPICILLIN TR 250MG CAPSULE	39271	\$0.1736	\$0.1157	\$0.1273	\$0.0116	10-12-2004
	ATENOLOL 100MG TABLET	20660	\$0.1650	\$0.1365	\$0.1447	\$0.0082	10-12-2004
	ATENOLOL 25MG TABLET	20662	\$0.1595	\$0.1053	\$0.1127	\$0.0064	10-12-2004
	ATENOLOL 50MG TABLET	20661	\$0.0885	\$0.1083	\$0.1148	\$0.0065	10-12-2004
	ATENOLOL/CHLOROTHAL 100/25	66991	\$0.2549	\$0.2483	\$0.2632	\$0.0149	10-12-2004
	ATENOLOL/CHLOROTHAL 50/25 TB	66990	\$0.1762	\$0.0748	\$0.0823	\$0.0075	10-12-2004
	ATRACURIUM 10MG/ML VIAL	23390		\$2.5000	\$2.6500	\$0.1500	10-12-2004
	AZATHIOPRINE 50MG TABLET	46771		\$1.0486	\$1.1115	\$0.0629	10-12-2004
	BACIT/POLYMYXIN EYE OINT	87589	\$0.0000	\$4.0829	\$4.4911	\$0.4083	10-12-2004
	BACLOFEN 10MG TABLET	18010	\$0.4492	\$0.2995	\$0.3295	\$0.0300	10-12-2004
	BACLOFEN 20MG TABLET	18011	\$0.8438	\$0.5625	\$0.6188	\$0.0563	10-12-2004
	BENAZEPRIL HCL 10MG TABLET	48612		\$0.3270	\$0.3597	\$0.0327	10-12-2004
	BENAZEPRIL HCL 20MG TABLET	48613		\$0.3270	\$0.3597	\$0.0327	10-12-2004
	BENAZEPRIL HCL 40MG TABLET	48614		\$0.3270	\$0.3597	\$0.0327	10-12-2004
	BENAZEPRIL HCL 5MG TABLET	48611		\$0.3270	\$0.3597	\$0.0327	10-12-2004
	BENAZEPRIL-HCTZ 10/12.5MG	33192		\$0.3679	\$0.3900	\$0.0221	10-12-2004

Unless otherwise noted, data source from First DataBank effective 06-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	BENZAEPRI-HCTZ 20/12.5MG	33193		\$0.3679	\$0.3900	\$0.0221	10-12-2004
	BENZAEPRI-HCTZ 20/25MG TB	33194		\$0.3679	\$0.3900	\$0.0221	10-12-2004
	BENZAEPRI-HCTZ 5/6.25MG TB	33191		\$0.3679	\$0.3900	\$0.0221	10-12-2004
	BENZONATE 100MG CAPSULE	29840	\$0.4387	\$0.3382	\$0.3585	\$0.0203	10-12-2004
	BENZTROPINE MES 0.5MG TAB	17620	\$0.1227	\$0.0811	\$0.0892	\$0.0081	10-12-2004
	BENZTROPINE MES 1MG TABLET	17621	\$0.1502	\$0.1170	\$0.1240	\$0.0070	10-12-2004
	BENZTROPINE MES 2MG TABLET	17622	\$0.1930	\$0.1459	\$0.1547	\$0.0088	10-12-2004
	BETAMETHASONE DP 0.05% CRM	31060	\$0.2300	\$0.3060	\$0.3244	\$0.0184	10-12-2004
	BETAMETHASONE DP 0.05% LOT	31080	\$0.1437	\$0.1083	\$0.1148	\$0.0065	10-12-2004
	BETAMETHASONE DP 0.05% OINT	31910		\$1.0333	\$1.1367	\$0.1033	10-12-2004
	BETAMETHASONE VA 0.1% CREAM	31101	\$0.1197	\$0.0987	\$0.1046	\$0.0059	10-12-2004
	BETHANECHOL 10MG TABLET	18351	\$0.0000	\$1.0037	\$1.1041	\$0.1004	10-12-2004
	BETHANECHOL 25MG TABLET	18352	\$0.0000	\$1.3381	\$1.4719	\$0.1338	10-12-2004
	BETHANECHOL 50MG TABLET	18354	\$0.0000	\$2.1410	\$2.3551	\$0.2141	10-12-2004
	BETHANECHOL 5MG TABLET	18353	\$0.0000	\$0.5419	\$0.5961	\$0.0542	10-12-2004
	BISOPROLOL FUMARATE 10MG TB	63820		\$0.9072	\$0.9979	\$0.0907	10-12-2004
	BISOPROLOL FUMARATE 5MG TAB	63821		\$0.9072	\$0.9979	\$0.0907	10-12-2004
	BISOPROLOL/HCTZ 10/6.25 TAB	45063	\$0.0000	\$0.6840	\$0.7524	\$0.0684	10-12-2004
	BISOPROLOL/HCTZ 2.5/6.25 TB	45061	\$0.8250	\$0.7609	\$0.8066	\$0.0457	10-12-2004
	BISOPROLOL/HCTZ 5/6.25 TAB	45062	\$0.8250	\$0.7609	\$0.8066	\$0.0457	10-12-2004
	BOROFAR EAR DROPS	14016		\$0.1177	\$0.1247	\$0.0071	10-12-2004
	BROMFED-DM COUGH SYRUP	96136	\$0.0168	\$0.0312	\$0.0343	\$0.0031	10-12-2004
	BUMETANIDE 0.5MG TABLET	35020	\$0.1743	\$0.1979	\$0.2098	\$0.0119	10-12-2004
	BUMETANIDE 1MG TABLET	35021	\$0.2814	\$0.1995	\$0.2115	\$0.0120	10-12-2004
	BUMETANIDE 2MG TABLET	35022	\$0.4708	\$0.3701	\$0.3923	\$0.0222	10-12-2004
	BUPROPION HCL 100MG TABLET	16385		\$0.7213	\$0.7646	\$0.0433	10-12-2004
	BUPROPION HCL 75MG TABLET	16384		\$0.5406	\$0.5730	\$0.0324	10-12-2004
	BUPROPION SR 100MG TABLET	16387		\$1.2668	\$1.3935	\$0.1267	10-12-2004
	BUPROPION SR 150MG TABLET	16386		\$1.3578	\$1.4936	\$0.1358	10-12-2004
	BUSPIRONE HCL 10MG TABLET	28891	\$0.3942	\$0.2628	\$0.2891	\$0.0263	10-12-2004
	BUSPIRONE HCL 15MG TABLET	28892	\$0.4470	\$0.2891	\$0.3180	\$0.0289	10-12-2004
	BUSPIRONE HCL 30MG TABLET	92121		\$2.9075	\$3.1983	\$0.2908	10-12-2004
	BUSPIRONE HCL 5MG TABLET	28890	\$0.2964	\$0.1976	\$0.2174	\$0.0198	10-12-2004
	BUTALBITAL COMPO/CD #3 CAP	69500		\$1.0400	\$1.1440	\$0.1040	10-12-2004
	BUTALBITAL COMPOUND CAPSULE	71150	\$0.0000	\$0.6400	\$0.6784	\$0.0384	10-12-2004
	BUTALBITAL COMPOUND TABLET	71160	\$0.2400	\$0.1600	\$0.1696	\$0.0096	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	BUTALBITAL/APAP/CAFFEINE TB	72531	\$0.5399	\$0.4580	\$0.5038	\$0.0458	10-12-2004
	BUTALBITAL-APAP-CAFFEINE TB	72530	\$0.0000	\$0.1575	\$0.1670	\$0.0094	10-12-2004
	BUTALBITAL-CAFF-APAP-COD CP	70140		\$1.0875	\$1.1963	\$0.1088	10-12-2004
	BUTORPHANOL 10MG/ML SPRAY	20351		\$22.5600	\$24.8160	\$2.2560	10-12-2004
	BUTORPHANOL 1MG/ML VIAL	16550		\$5.4000	\$5.9400	\$0.5400	10-12-2004
	BUTORPHANOL 2MG/ML VIAL	16551		\$5.8000	\$6.3800	\$0.5800	10-12-2004
	CAPTOPRIL 100MG TABLET	01480	\$0.1867	\$0.1346	\$0.1427	\$0.0081	10-12-2004
	CAPTOPRIL 12.5MG TABLET	01483	\$0.0398	\$0.0321	\$0.0340	\$0.0019	10-12-2004
	CAPTOPRIL 25MG TABLET	01481	\$0.0442	\$0.0205	\$0.0217	\$0.0012	10-12-2004
	CAPTOPRIL 50MG TABLET	01482	\$0.0892	\$0.0725	\$0.0769	\$0.0044	10-12-2004
	CAPTOPRIL/HCTZ 25/15 TABLET	54940	\$0.2359	\$0.1542	\$0.1696	\$0.0154	10-12-2004
	CAPTOPRIL/HCTZ 25/25 TABLET	54941	\$0.2360	\$0.1650	\$0.1749	\$0.0099	10-12-2004
	CAPTOPRIL/HCTZ 50/15 TABLET	54942	\$0.0000	\$0.2468	\$0.2715	\$0.0247	10-12-2004
	CAPTOPRIL/HCTZ 50/25 TABLET	54943	\$0.3702	\$0.2468	\$0.2715	\$0.0247	10-12-2004
	CARBAMAZEPINE 100MG TAB CHW	17460	\$0.0000	\$0.1425	\$0.1511	\$0.0086	10-12-2004
	CARBAMAZEPINE 100MG/5ML SUS	47500		\$0.0550	\$0.0605	\$0.0055	10-12-2004
	CARBAMAZEPINE 200MG TABLET	17450	\$0.1388	\$0.1000	\$0.1060	\$0.0060	10-12-2004
	CARBIDOPALEVO 10/100 TAB	62740	\$0.3644	\$0.2615	\$0.2877	\$0.0262	10-12-2004
	CARBIDOPALEVO 25/100 TAB	62741	\$0.4455	\$0.2970	\$0.3267	\$0.0297	10-12-2004
	CARBIDOPALEVO 25/100 TB SA	62592		\$0.6275	\$0.6903	\$0.0628	10-12-2004
	CARBIDOPALEVO 25/250 TAB	62742	\$0.5145	\$0.3430	\$0.3773	\$0.0343	10-12-2004
	CARBIDOPA-LEVO 50/200 TB SA	62591		\$1.2572	\$1.3829	\$0.1257	10-12-2004
	CARISOPRODOL 350MG TABLET	17912	\$0.3743	\$0.2495	\$0.2845	\$0.0150	10-12-2004
	CARISOPRODOL COMPOUND TAB	94380	\$0.3522	\$0.2000	\$0.2120	\$0.0120	10-12-2004
	CEFACLOX 125MG/5ML SUSPEN	40030	\$0.1107	\$0.1105	\$0.1172	\$0.0066	10-12-2004
	CEFACLOX 187MG/5ML SUSPEN	40032	\$0.1661	\$0.0990	\$0.1089	\$0.0099	10-12-2004
	CEFACLOX 250MG CAPSULE	40020	\$0.6600	\$0.4320	\$0.4752	\$0.0432	10-12-2004
	CEFACLOX 250MG/5ML SUSPEN	40031	\$0.2995	\$0.2127	\$0.2254	\$0.0128	10-12-2004
	CEFACLOX 375MG/5ML SUSPEN	40033	\$0.4492	\$0.3190	\$0.3381	\$0.0191	10-12-2004
	CEFACLOX 500MG CAPSULE	40021	\$1.2900	\$0.8575	\$0.9433	\$0.0858	10-12-2004
	CEFADROXIL 500MG CAPSULE	45341	\$2.4837	\$2.1233	\$2.2507	\$0.1274	10-12-2004
	CEPHALEXIN 250MG CAPSULE	39801	\$0.2513	\$0.1223	\$0.1345	\$0.0122	10-12-2004
	CEPHALEXIN 500MG CAPSULE	39802	\$0.4446	\$0.2427	\$0.2670	\$0.0243	10-12-2004
	CHLORDIAZEPOXIDE 10MG CAP	14031	\$0.0877	\$0.0585	\$0.0620	\$0.0035	10-12-2004
	CHLORDIAZEPOXIDE 25MG CAP	14032	\$0.0000	\$0.0660	\$0.0700	\$0.0040	10-12-2004
	CHLORDIAZEPOXIDE 5MG CAP	14033	\$0.1140	\$0.0760	\$0.0806	\$0.0046	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	CHLORHEXIDINE 0.12% RINSE	31950	\$0.0146	\$0.0100	\$0.0105	\$0.0006	10-12-2004
	CHLORPROPAMIDE 100MG TABLET	05731	\$0.1837	\$0.1592	\$0.1688	\$0.0096	10-12-2004
	CHLORPROPAMIDE 250MG TABLET	05732	\$0.3885	\$0.3364	\$0.3566	\$0.0202	10-12-2004
	CHLORZOXAZONE 500MG TABLET	17901	\$0.1085	\$0.0595	\$0.0631	\$0.0036	10-12-2004
	CHOLESTYRAMINE LIGHT POWDER	09840		\$0.1584	\$0.1743	\$0.0158	10-12-2004
	CIMETIDINE 200MG TABLET	46750	\$0.1238	\$0.1298	\$0.1376	\$0.0078	10-12-2004
	CIMETIDINE 300MG TABLET	46751	\$0.1313	\$0.0875	\$0.0963	\$0.0088	10-12-2004
	CIMETIDINE 300MG/5ML LIQUID	46740	\$0.1139	\$0.0759	\$0.0835	\$0.0076	10-12-2004
	CIMETIDINE 400MG TABLET	46752	\$0.1537	\$0.1045	\$0.1150	\$0.0105	10-12-2004
	CIMETIDINE 800MG TABLET	46753	\$0.2775	\$0.1970	\$0.2088	\$0.0118	10-12-2004
	CIPROFLOXACIN 0.3% EYE DROP	33580		\$5.7120	\$6.0547	\$0.3427	10-12-2004
	CIPROFLOXACIN HCL 250MG TABLET	47050		\$0.2500	\$0.2750	\$0.0250	10-12-2004
	CIPROFLOXACIN HCL 500MG TABLET	47051		\$0.3000	\$0.3300	\$0.0300	10-12-2004
	CIPROFLOXACIN HCL 750MG TABLET	47052		\$0.4490	\$0.4759	\$0.0269	10-12-2004
	CLEMASTINE 0.67MG/5ML SYRUP	46990		\$0.0589	\$0.0624	\$0.0035	10-12-2004
	CLINDAMYCIN 1% GEL	45410		\$0.6600	\$0.7260	\$0.0660	10-12-2004
	CLINDAMYCIN 1% LOTION	31770		\$0.8530	\$0.9042	\$0.0512	10-12-2004
	CLINDAMYCIN 1% SOLUTION	31720	\$0.2060	\$0.7197	\$0.7916	\$0.0720	10-12-2004
	CLINDAMYCIN HCL 150MG CAPS	40830	\$0.9180	\$0.6150	\$0.6765	\$0.0615	10-12-2004
	CLINDAMYCIN HCL 300MG CAPS	40832		\$2.7878	\$3.0666	\$0.2788	10-12-2004
	GLOBETASOL 0.05% CREAM	32140	\$0.8315	\$0.7333	\$0.7773	\$0.0440	10-12-2004
	GLOBETASOL 0.05% GEL	15892		\$1.2133	\$1.2861	\$0.0728	10-12-2004
	GLOBETASOL 0.05% OINTMENT	32130	\$0.0000	\$0.7333	\$0.7773	\$0.0440	10-12-2004
	GLOBETASOL 0.05% SOLUTION	15891		\$0.6324	\$0.6703	\$0.0379	10-12-2004
	CLOMIPRAMINE 25MG CAPSULE	16602	\$0.3322	\$0.2500	\$0.2750	\$0.0250	10-12-2004
	CLOMIPRAMINE 50MG CAPSULE	16603	\$0.5138	\$0.3425	\$0.3768	\$0.0342	10-12-2004
	CLOMIPRAMINE 75MG CAPSULE	16604	\$0.5772	\$0.4625	\$0.4903	\$0.0278	10-12-2004
	CLONAZEPAM 0.5MG TABLET	17470	\$0.2455	\$0.0300	\$0.0318	\$0.0018	10-12-2004
	CLONAZEPAM 1MG TABLET	17471	\$0.2852	\$0.0485	\$0.0514	\$0.0029	10-12-2004
	CLONAZEPAM 2MG TABLET	17472	\$0.3903	\$0.0661	\$0.0701	\$0.0040	10-12-2004
	CLONIDINE HCL 0.1MG TABLET	01390	\$0.0968	\$0.0705	\$0.0776	\$0.0071	10-12-2004
	CLONIDINE HCL 0.2MG TABLET	01391	\$0.1350	\$0.1000	\$0.1060	\$0.0060	10-12-2004
	CLONIDINE HCL 0.3MG TABLET	01392	\$0.1830	\$0.1295	\$0.1373	\$0.0078	10-12-2004
	CLORAZEPATE 15MG TABLET	14090	\$1.4094	\$0.9918	\$1.0513	\$0.0595	10-12-2004
	CLORAZEPATE 3.75MG TABLET	14092	\$0.8350	\$0.5876	\$0.6229	\$0.0353	10-12-2004
	CLORAZEPATE 7.5MG TABLET	14093	\$1.0388	\$0.7310	\$0.7749	\$0.0439	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	CLOTRIMAZOLE 1% CREAM	30370		\$0.2613	\$0.2769	\$0.0156	10-12-2004
	CLOTRIMAZOLE 1% SOLUTION	30380	\$0.0000	\$0.4480	\$0.4749	\$0.0269	10-12-2004
	CLOZAPINE 100MG TABLET	18142		\$2.4585	\$2.7044	\$0.2459	10-12-2004
	CLOZAPINE 25MG TABLET	18141		\$0.9489	\$1.0438	\$0.0949	10-12-2004
	CORTOMYCIN EAR SUSPENSION	14025		\$1.4250	\$1.5675	\$0.1425	10-12-2004
	CORTOMYCIN EYE OINTMENT	14279	\$0.0000	\$1.5714	\$1.6657	\$0.0943	10-12-2004
	CROMOLYN 4% EYE DROPS	69069	\$3.3750	\$2.2500	\$2.4750	\$0.2250	10-12-2004
	CROMOLYN NEBULIZER SOLUTION	46780		\$0.1650	\$0.1749	\$0.0099	10-12-2004
	CYCLOBENZAPRINE 10MG TABLET	18020	\$0.2728	\$0.1830	\$0.1940	\$0.0110	10-12-2004
	CYCLOPENTOLATE 1% EYE DROPS	33031	\$0.0000	\$1.4000	\$1.5400	\$0.1400	10-12-2004
	CYPROHEPTADINE 4MG TABLET	15811	\$0.0000	\$0.2600	\$0.2756	\$0.0156	10-12-2004
	D5-1/2NS/KCL 10MEQ/L IV SOL	62660		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5-1/2NS/KCL 30MEQ/L IV SOL	62662		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5-1/2NS/KCL 40MEQ/L IV SOL	62661		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5-1/4NS/KCL 10MEQ/L IV SOL	62722		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5-1/4NS/KCL 30MEQ/L IV SOL	62721		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5-1/4NS/KCL 40MEQ/L IV SOL	62720		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5WK/L 20MEQ/L IV SOLUTION	62111		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D5WK/L 40MEQ/L IV SOLUTION	62113		\$0.0024	\$0.0027	\$0.0002	10-12-2004
	D-AMPHETAMINE 10MG CAP SA	19850		\$0.6908	\$0.7599	\$0.0691	10-12-2004
	D-AMPHETAMINE 15MG CAP SA	19851		\$0.8834	\$0.9717	\$0.0883	10-12-2004
	D-AMPHETAMINE 5MG CAP SA	19852		\$0.5546	\$0.6101	\$0.0555	10-12-2004
	DESIPRAMINE 100MG TABLET	16584	\$0.0000	\$0.9026	\$0.9568	\$0.0542	10-12-2004
	DESIPRAMINE 25MG TABLET	16586	\$0.0000	\$0.2867	\$0.3039	\$0.0172	10-12-2004
	DESIPRAMINE 50MG TABLET	16587	\$0.0000	\$0.5397	\$0.5721	\$0.0324	10-12-2004
	DESONIDE 0.05% CREAM	31425	\$0.2337	\$0.3900	\$0.4134	\$0.0234	10-12-2004
	DESONIDE 0.05% OINTMENT	31430	\$0.4077	\$1.4667	\$1.5547	\$0.0880	10-12-2004
	DEXTROAMPHETAMINE 10MG TAB	19880		\$0.2290	\$0.2519	\$0.0229	10-12-2004
	DEXTROAMPHETAMINE 5MG TAB	19881	\$0.0000	\$0.1656	\$0.1822	\$0.0166	10-12-2004
	DEXTROSE 2.5%-1/2NS IV SOLN	06910		\$0.0016	\$0.0018	\$0.0002	10-12-2004
	DEXTROSE 5%/WATER IV SOLN.	06641		\$0.0856	\$0.0942	\$0.0086	10-12-2004
	DEXTROSE 5%-1/2NS IV SOLN.	06940		\$0.0058	\$0.0064	\$0.0006	10-12-2004
	DEXTROSE 5%-LR IV SOLUTION	07040		\$0.0032	\$0.0035	\$0.0003	10-12-2004
	DEXTROSE 5%-NS IV SOLUTION	06931		\$0.0058	\$0.0063	\$0.0006	10-12-2004
	DEXTROSE 5%-RINGERS IV SOLN	07010		\$0.0022	\$0.0024	\$0.0002	10-12-2004
	DEXTROSE 10%/WATER IV SOLN.	06671		\$0.0064	\$0.0070	\$0.0006	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	DIANEAL PD-2 /1.5% DEXTROSE	04234		\$0.0621	\$0.0684	\$0.0062	10-12-2004
	DIANEAL PD-2 /2.5% DEXTROSE	04235		\$0.0373	\$0.0410	\$0.0037	10-12-2004
	DIANEAL PD-2/4 25% DEXTROSE	04237		\$0.0373	\$0.0410	\$0.0037	10-12-2004
	DIAZEPAM 10MG TABLET	14220	\$0.1417	\$0.0925	\$0.0981	\$0.0056	10-12-2004
	DIAZEPAM 2MG TABLET	14221	\$0.0423	\$0.0299	\$0.0317	\$0.0018	10-12-2004
	DIAZEPAM 5MG TABLET	14222	\$0.0718	\$0.0479	\$0.0508	\$0.0029	10-12-2004
	DICLOFENAC POT 50MG TABLET	13960	\$0.8625	\$0.8125	\$0.8613	\$0.0488	10-12-2004
	DICLOFENAC SOD 100MG TAB SA	13310		\$1.9735	\$2.0919	\$0.1184	10-12-2004
	DICLOFENAC SOD 50MG TAB EC	35851	\$0.4748	\$0.3508	\$0.3718	\$0.0210	10-12-2004
	DICLOFENAC SOD 75MG TAB EC	35852	\$0.5850	\$0.3900	\$0.4134	\$0.0234	10-12-2004
	DICYCLOMINE 10MG CAPSULE	19261	\$0.1222	\$0.0590	\$0.0625	\$0.0035	10-12-2004
	DICYCLOMINE 20MG TABLET	19331	\$0.1185	\$0.0790	\$0.0837	\$0.0047	10-12-2004
	DIFLORASONE 0.05% OINTMENT	31480		\$1.5657	\$1.7233	\$0.1567	10-12-2004
	DIGOXIN 125MCG TABLET	00132		\$0.1620	\$0.1717	\$0.0097	10-12-2004
	DIGOXIN 250MCG TABLET	00133		\$0.1620	\$0.1717	\$0.0097	10-12-2004
	DILTIAZEM 120MG CAPSULE SA	02330		\$0.8459	\$0.9305	\$0.0846	10-12-2004
	DILTIAZEM 120MG TABLET	02363	\$0.2331	\$0.1553	\$0.1708	\$0.0155	10-12-2004
	DILTIAZEM 180MG CAPSULE SA	02329		\$1.0209	\$1.1230	\$0.1021	10-12-2004
	DILTIAZEM 240MG CAPSULE SA	02332	\$0.0000	\$1.4631	\$1.6094	\$0.1463	10-12-2004
	DILTIAZEM 300MG CAPSULE SA	02333		\$1.9049	\$2.0953	\$0.1905	10-12-2004
	DILTIAZEM 30MG TABLET	02360	\$0.1019	\$0.0532	\$0.0564	\$0.0032	10-12-2004
	DILTIAZEM 360MG CAPSULE SA	02328		\$1.9233	\$2.1157	\$0.1923	10-12-2004
	DILTIAZEM 5MG/ML VIAL	02641		\$0.6300	\$0.6678	\$0.0378	10-12-2004
	DILTIAZEM 60MG TABLET	02361	\$0.1114	\$0.0743	\$0.0817	\$0.0074	10-12-2004
	DILTIAZEM 90MG TABLET	02362	\$0.2312	\$0.1052	\$0.1115	\$0.0063	10-12-2004
	DILTIAZEM ER 180MG CAP SA	07461		\$0.6250	\$0.6625	\$0.0375	10-12-2004
	DILTIAZEM HCL 120MG CAP SA	02326		\$0.7592	\$0.8351	\$0.0759	10-12-2004
	DILTIAZEM HCL 180MG CAP SA	02323		\$0.9164	\$1.0080	\$0.0916	10-12-2004
	DILTIAZEM HCL 240MG CAP SA	02324	\$0.0000	\$1.3000	\$1.4300	\$0.1300	10-12-2004
	DILTIAZEM HCL 300MG CAP SA	02325		\$1.6848	\$1.8533	\$0.1685	10-12-2004
	DILT-XR 120MG CAP SA	07463		\$0.4605	\$0.4881	\$0.0276	10-12-2004
	DILT-XR 240MG CAP SA	07462	\$0.0000	\$0.7907	\$0.8381	\$0.0474	10-12-2004
	DIPHENHYDRAMINE 25MG CAPSULE	45971	\$0.0000	\$0.0319	\$0.0338	\$0.0019	10-12-2004
	DIPHENOXYLATE/ATROPINE TAB	65030	\$0.3743	\$0.1150	\$0.1219	\$0.0069	10-12-2004
	DIPIVEFRIN 0.1% EYE DROPS	33060	\$0.8700	\$0.5800	\$0.6380	\$0.0580	10-12-2004
	DIPYRIDAMOLE 25MG TABLET	53141	\$0.0000	\$0.1316	\$0.1395	\$0.0079	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

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BATES STAMP NO

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	DIPYRIDAMOLE 50MG TABLET	53142	\$0.0000	\$0.1605	\$0.1701	\$0.0096	10-12-2004
	DIPYRIDAMOLE 5MG/ML VIAL	10521		\$2.5000	\$2.7500	\$0.2500	10-12-2004
	DIPYRIDAMOLE 75MG TABLET	53143	\$0.0000	\$0.1679	\$0.1780	\$0.0101	10-12-2004
	DISOPYRAMIDE 100MG CAPSULE	01130	\$0.0000	\$0.3986	\$0.4385	\$0.0399	10-12-2004
	DISOPYRAMIDE 150MG CAPSULE	01131	\$0.0000	\$0.4192	\$0.4611	\$0.0419	10-12-2004
	DOBUTAMINE 12.5MG/ML VIAL	00975		\$0.2000	\$0.2120	\$0.0120	10-12-2004
	DOXAZOSIN MESYLATE 1MG TAB	33431	\$0.5918	\$0.1664	\$0.1764	\$0.0100	10-12-2004
	DOXAZOSIN MESYLATE 2MG TAB	33432	\$0.5918	\$0.1664	\$0.1764	\$0.0100	10-12-2004
	DOXAZOSIN MESYLATE 4MG TAB	33433	\$0.6210	\$0.1758	\$0.1863	\$0.0105	10-12-2004
	DOXAZOSIN MESYLATE 8MG TAB	33434	\$0.6518	\$0.1845	\$0.1956	\$0.0111	10-12-2004
	DOXEPIN 100MG CAPSULE	16564	\$0.4174	\$0.1365	\$0.1502	\$0.0137	10-12-2004
	DOXEPIN 10MG CAPSULE	16563	\$0.0891	\$0.0525	\$0.0578	\$0.0053	10-12-2004
	DOXEPIN 10MG/ML ORAL CONC	16571	\$0.1145	\$0.0763	\$0.0840	\$0.0076	10-12-2004
	DOXEPIN 25MG CAPSULE	16566	\$0.1822	\$0.0630	\$0.0693	\$0.0063	10-12-2004
	DOXEPIN 50MG CAPSULE	16567	\$0.1447	\$0.0920	\$0.1012	\$0.0092	10-12-2004
	DOXEPIN 75MG CAPSULE	16568	\$0.2052	\$0.1188	\$0.1259	\$0.0071	10-12-2004
	DOXYCYCLINE 100MG CAPSULE	40331	\$0.1491	\$0.0750	\$0.0895	\$0.0145	10-12-2004
	DOXYCYCLINE 100MG TABLET	40360	\$0.1287	\$0.0750	\$0.0825	\$0.0075	10-12-2004
	DOXYCYCLINE 50MG CAPSULE	40333	\$0.1125	\$0.0880	\$0.0968	\$0.0088	10-12-2004
	ECONAZOLE NITRATE 1% CREAM	30430		\$0.8327	\$0.8826	\$0.0500	10-12-2004
	ENALAPRIL MALEATE 10MG TAB	00961	\$0.6863	\$0.4015	\$0.4256	\$0.0241	10-12-2004
	ENALAPRIL MALEATE 2.5MG TAB	00963	\$0.3075	\$0.3010	\$0.3191	\$0.0181	10-12-2004
	ENALAPRIL MALEATE 20MG TAB	00962	\$0.9150	\$0.5715	\$0.6058	\$0.0343	10-12-2004
	ENALAPRIL MALEATE 5MG TAB	00960	\$0.5490	\$0.3660	\$0.3880	\$0.0220	10-12-2004
	ENALAPRIL/HCTZ 10-25MG TAB	54860		\$0.8895	\$0.9429	\$0.0534	10-12-2004
	ENALAPRIL/HCTZ 5-12.5MG TAB	54862		\$0.7994	\$0.8474	\$0.0480	10-12-2004
	ERGOLOID MESYLATES 1MG TAB	02213	\$0.0000	\$0.8290	\$0.9119	\$0.0829	10-12-2004
	ERYTHROMYCIN 2% SOLUTION	77562	\$0.0687	\$0.0437	\$0.0481	\$0.0044	10-12-2004
	ERYTHROMYCIN 2% TOPICAL GEL	31710	\$0.6250	\$0.8911	\$0.9802	\$0.0891	10-12-2004
	ERYTHROMYCIN/SULFISOX SUSP	14037	\$0.0000	\$0.0530	\$0.0562	\$0.0032	10-12-2004
	ESTAZOLAM 1MG TABLET	19181	\$0.5925	\$0.3950	\$0.4345	\$0.0395	10-12-2004
	ESTAZOLAM 2MG TABLET	19182	\$0.6449	\$0.4299	\$0.4729	\$0.0430	10-12-2004
	ESTRADIOL 0.5MG TABLET	10772	\$0.1791	\$0.1190	\$0.1309	\$0.0119	10-12-2004
	ESTRADIOL 1MG TABLET	10770	\$0.1932	\$0.1450	\$0.1595	\$0.0145	10-12-2004
	ESTRADIOL 2MG TABLET	10771	\$0.3060	\$0.2033	\$0.2236	\$0.0203	10-12-2004
	ESTROPIRATE 0.625(0.75 MG) TAB	11080	\$0.2754	\$0.1836	\$0.1946	\$0.0110	10-12-2004

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Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	ESTROPIRATE 1.25(1.5 MG) TAB	11084	\$0.3450	\$0.2525	\$0.2677	\$0.0152	10-12-2004
	ESTROPIRATE 2.5(3 MG) TAB	11085	\$0.8622	\$0.5749	\$0.6324	\$0.0575	10-12-2004
	ETODOLAC 200MG CAPSULE	33870	\$0.4800	\$0.4389	\$0.4652	\$0.0263	10-12-2004
	ETODOLAC 300MG CAPSULE	33871	\$0.0000	\$0.4987	\$0.5286	\$0.0299	10-12-2004
	ETODOLAC 400MG TABLET	61761	\$0.3600	\$0.2615	\$0.2877	\$0.0262	10-12-2004
	ETODOLAC 400MG TABLET SA	61765		\$1.1202	\$1.2322	\$0.1120	10-12-2004
	ETODOLAC 500MG TABLET	61766	\$1.0032	\$0.6986	\$0.7405	\$0.0419	10-12-2004
	ETODOLAC 500MG TABLET SA	61767		\$1.1706	\$1.2877	\$0.1171	10-12-2004
	ETOPOSIDE 20MG/ML VIAL	07481		\$3.0000	\$3.1800	\$0.1800	10-12-2004
	FAMOTIDINE 10MG/ML VIAL	46410		\$0.4450	\$0.4895	\$0.0445	10-12-2004
	FAMOTIDINE 20MG TABLET	46430	\$0.6210	\$0.1000	\$0.1100	\$0.0100	10-12-2004
	FAMOTIDINE 40MG TABLET	46431	\$1.2000	\$0.2000	\$0.2200	\$0.0200	10-12-2004
	FENTANYL 0.05MG/ML AMPUL	32806		\$0.4250	\$0.4505	\$0.0255	10-12-2004
	FLECAINIDE ACETATE 100MG TB	01580		\$1.9100	\$2.0246	\$0.1146	10-12-2004
	FLECAINIDE ACETATE 150MG TB	01582		\$2.6285	\$2.7862	\$0.1577	10-12-2004
	FLECAINIDE ACETATE 50MG TAB	01581		\$1.2180	\$1.2911	\$0.0731	10-12-2004
	FLUCONAZOLE 100MG TABLET	42190		\$1.1300	\$1.1978	\$0.0678	10-12-2004
	FLUCONAZOLE 200MG TABLET	42191		\$1.9400	\$2.0564	\$0.1164	10-12-2004
	FLUCONAZOLE 50MG TABLET	42192		\$1.3487	\$1.4296	\$0.0809	10-12-2004
	FLUCONAZOLE-SALINE 0.2GM/100ML	69790		\$0.4800	\$0.5088	\$0.0288	10-12-2004
	FLUCONAZOLE-SALINE 0.4GM/200ML	69791		\$0.3500	\$0.3710	\$0.0210	10-12-2004
	FLUDROCORTISONE 0.1MG TAB	27680		\$0.5897	\$0.6251	\$0.0354	10-12-2004
	FLUOCINONIDE 0.05% CREAM	31390	\$0.1789	\$0.1460	\$0.1548	\$0.0088	10-12-2004
	FLUOCINONIDE 0.05% GEL	31380	\$0.4965	\$0.3333	\$0.3953	\$0.0620	10-12-2004
	FLUOCINONIDE 0.05% OINTMENT	31400	\$0.0000	\$0.6667	\$0.7067	\$0.0400	10-12-2004
	FLUOCINONIDE 0.05% SOLUTION	31401	\$0.2483	\$0.5485	\$0.6034	\$0.0549	10-12-2004
	FLUOCINONIDE-E 0.05% CREAM	54650	\$0.0000	\$0.3373	\$0.3576	\$0.0202	10-12-2004
	FLUOROMETHOLONE 0.1% DROPS	33250	\$1.6590	\$1.6700	\$1.7702	\$0.1002	10-12-2004
	FLUOXETINE 10MG CAPSULE	16353	\$0.5850	\$0.2125	\$0.2253	\$0.0128	10-12-2004
	FLUOXETINE 10MG TABLET	16356	\$0.6000	\$0.3900	\$0.4290	\$0.0390	10-12-2004
	FLUOXETINE 20MG CAPSULE	16354	\$0.2520	\$0.2250	\$0.2385	\$0.0135	10-12-2004
	FLUOXETINE 20MG/5ML SOLN	16357	\$0.7500	\$0.5000	\$0.5300	\$0.0300	10-12-2004
	FLUOXETINE 40MG CAPSULE	16355	\$4.0125	\$2.6750	\$2.9300	\$0.2550	10-12-2004
	FLUPHENAZINE 10MG TABLET	14603	\$0.5099	\$0.2836	\$0.3006	\$0.0170	10-12-2004
	FLUPHENAZINE 1MG TABLET	14602	\$0.2273	\$0.1250	\$0.1325	\$0.0075	10-12-2004
	FLUPHENAZINE 2.5MG TABLET	14604	\$0.2775	\$0.1850	\$0.1961	\$0.0111	10-12-2004

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	FLUPHENAZINE 5MG TABLET	14605	\$0.3546	\$0.2364	\$0.2506	\$0.0142	10-12-2004
	FLUPHENAZINE DEC 25MG/ML VL	14540		\$4.0000	\$4.4000	\$0.4000	10-12-2004
	FLURAZEPAM 15MG CAPSULE	14250	\$0.0975	\$0.0650	\$0.0715	\$0.0065	10-12-2004
	FLURAZEPAM 30MG CAPSULE	14251	\$0.1148	\$0.0799	\$0.0847	\$0.0048	10-12-2004
	FLURBIPROFEN 0.03% EYE DROP	34360	\$4.0679	\$2.7120	\$2.9832	\$0.2712	10-12-2004
	FLURBIPROFEN 100MG TABLET	35711	\$0.3600	\$0.2450	\$0.2597	\$0.0147	10-12-2004
	FLUTAMIDE 125MG CAPSULE	25740		\$1.5498	\$1.6428	\$0.0930	10-12-2004
	FLUTICASONONE PROP 0.005% OINT	48641		\$1.0573	\$1.1208	\$0.0634	10-12-2004
	FLUTICASONONE PROP 0.05% CREAM	43951		\$1.0573	\$1.1208	\$0.0634	10-12-2004
	FLUVOXAMINE MAL 100MG TAB	16349		\$1.7609	\$1.8666	\$0.1057	10-12-2004
	FLUVOXAMINE MALEATE 25MG TB	16347		\$1.5365	\$1.6287	\$0.0922	10-12-2004
	FLUVOXAMINE MALEATE 50MG TB	16348		\$1.7168	\$1.8198	\$0.1030	10-12-2004
	FOLIC ACID 1MG TABLET	94781	\$0.0000	\$0.1950	\$0.2145	\$0.0195	10-12-2004
	FOSINOPRIL SODIUM 10MG TAB	48581		\$0.9459	\$1.0026	\$0.0568	10-12-2004
	FOSINOPRIL SODIUM 20MG TAB	48582		\$0.9459	\$1.0026	\$0.0568	10-12-2004
	FOSINOPRIL SODIUM 40MG TAB	48580		\$0.9459	\$1.0026	\$0.0568	10-12-2004
	FUROSEMIDE 20MG TABLET	34961	\$0.0563	\$0.0460	\$0.0488	\$0.0028	10-12-2004
	FUROSEMIDE 40MG TABLET	34962	\$0.0599	\$0.0475	\$0.0504	\$0.0029	10-12-2004
	FUROSEMIDE 80MG TABLET	34963	\$0.1043	\$0.0963	\$0.1021	\$0.0058	10-12-2004
	GEMFIBROZIL 600MG TABLET	25540	\$0.3800	\$0.2533	\$0.2787	\$0.0253	10-12-2004
	GENTAMICIN 3MG/ML EYE DROPS	33600	\$0.6540	\$0.4400	\$0.4840	\$0.0440	10-12-2004
	GENTAMICIN 40MG/ML VIAL	41132		\$2.6490	\$2.8079	\$0.1589	10-12-2004
	GENTAMICIN 60MG/NS 50ML PB	41109		\$0.0708	\$0.0779	\$0.0071	10-12-2004
	GENTAMICIN 80MG/NS 100ML PB	41104		\$0.0462	\$0.0508	\$0.0046	10-12-2004
	GENTAMICIN 80MG/NS 50ML PB	41108		\$0.0758	\$0.0834	\$0.0076	10-12-2004
	GLIPIZIDE 10MG TABLET	10841	\$0.0944	\$0.0930	\$0.0986	\$0.0056	10-12-2004
	GLIPIZIDE 5MG TABLET	10840	\$0.0699	\$0.0635	\$0.0699	\$0.0063	10-12-2004
	GLIPIZIDE ER 5MG TABLET	10844		\$0.3253	\$0.3578	\$0.0325	10-12-2004
	GLYBURIDE 1.25MG TABLET	05710	\$0.0000	\$0.1115	\$0.1182	\$0.0067	10-12-2004
	GLYBURIDE 2.5MG TABLET	05711	\$0.0000	\$0.1475	\$0.1564	\$0.0089	10-12-2004
	GLYBURIDE 5MG TABLET	05712	\$0.0000	\$0.2105	\$0.2231	\$0.0126	10-12-2004
	GLYBURIDE MICRO 1.5MG TAB	05713	\$0.2549	\$0.1725	\$0.1898	\$0.0173	10-12-2004
	GLYBURIDE MICRO 3MG TABLET	05714	\$0.3202	\$0.2250	\$0.2385	\$0.0135	10-12-2004
	GLYBURIDE-METFORMIN 1.25/250MG TAB	89878		\$0.6715	\$0.7387	\$0.0672	10-12-2004
	GLYBURIDE-METFORMIN 2.5/500MG TAB	92889		\$0.8015	\$0.8817	\$0.0802	10-12-2004
	GLYBURIDE-METFORMIN 5/500MG TAB	89879		\$0.7600	\$0.8360	\$0.0760	10-12-2004

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Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	GLYCINE 1.5% IRRIGATION	45760		\$0.0028	\$0.0031	\$0.0003	10-12-2004
	GLYCOPYRRROLATE 0.2MG/ML VL	19121		\$0.7000	\$0.7700	\$0.0700	10-12-2004
	GUANFACINE 1MG TABLET	32480	\$0.5250	\$0.2095	\$0.2221	\$0.0126	10-12-2004
	GUANFACINE 2MG TABLET	32481	\$0.7200	\$0.4674	\$0.4954	\$0.0280	10-12-2004
	HALOPERIDOL LAC 2MG/ML CONC	15520	\$0.1500	\$0.2400	\$0.2640	\$0.0240	10-12-2004
	HALOPERIDOL LAC 5MG/ML VIAL	15500		\$5.9900	\$6.5890	\$0.5990	10-12-2004
	HEPARIN 1000U/NS 500ML	81991		\$0.0060	\$0.0066	\$0.0006	10-12-2004
	HEPARIN 12500U/D5W 250ML	62841		\$0.0220	\$0.0242	\$0.0022	10-12-2004
	HEP-LOCK 100U/ML VIAL	25692		\$0.0347	\$0.0368	\$0.0021	10-12-2004
	HYDROCORTISONE/APAP 10/325 TAB	70330		\$0.4515	\$0.7756	\$0.3241	10-12-2004
	HYDROCORTISONE/APAP 10/500 TAB	70334	\$0.4603	\$0.3419	\$0.4434	\$0.1015	10-12-2004
	HYDROCORTISONE/APAP 10/650 TAB	70332	\$0.1852	\$0.1359	\$0.1852	\$0.0493	10-12-2004
	HYDROCORTISONE/APAP 10/660 TAB	70363	\$0.5284	\$0.7586	\$0.8041	\$0.0455	10-12-2004
	HYDROCORTISONE/APAP 2.5/500 TB	70338	\$0.2190	\$0.6778	\$0.7185	\$0.0407	10-12-2004
	HYDROCORTISONE/APAP 5/325MG TABLET	12486		\$0.5200	\$0.5512	\$0.0312	10-12-2004
	HYDROCORTISONE/APAP 5/500 TAB	70331	\$0.1153	\$0.1050	\$0.1113	\$0.0063	10-12-2004
	HYDROCORTISONE/APAP 7.5/325MG TABLET	12488		\$0.5968	\$0.6326	\$0.0358	10-12-2004
	HYDROCORTISONE/APAP 7.5/500 TB	70339	\$0.1913	\$0.1275	\$0.1913	\$0.0638	10-12-2004
	HYDROCORTISONE/APAP 7.5/650 TB	70333	\$0.1550	\$0.1034	\$0.1096	\$0.0062	10-12-2004
	HYDROCORTISONE/APAP 7.5/750 TB	70335	\$0.1548	\$0.1032	\$0.1094	\$0.0062	10-12-2004
	HYDROCORTISONE/HOMATROPINE SYRUP	13973	\$0.0280	\$0.0314	\$0.0345	\$0.0031	10-12-2004
	HYDROCORTISONE-APAP SOLUTION	20906	\$0.1014	\$0.0712	\$0.0783	\$0.0071	10-12-2004
	HYDROCORTISONE-HOMATROPINE TABLET	96041		\$0.3126	\$0.3314	\$0.0188	10-12-2004
	HYDROCORTISONE 0.2% CREAM	30890		\$0.6993	\$0.7413	\$0.0420	10-12-2004
	HYDROCORTISONE 1% CREAM	30942	\$0.0585	\$0.0800	\$0.0880	\$0.0080	10-12-2004
	HYDROCORTISONE 1% LOTION	30974	\$0.0572	\$0.1246	\$0.1370	\$0.0125	10-12-2004
	HYDROCORTISONE 2.5% CREAM	30943	\$0.1820	\$0.2365	\$0.2507	\$0.0142	10-12-2004
	HYDROCORTISONE 2.5% OINT	30952	\$0.0000	\$0.2233	\$0.2367	\$0.0134	10-12-2004
	HYDROCORTISONE VAL 0.2% OIN	06040		\$0.6731	\$0.7135	\$0.0404	10-12-2004
	HYDROXYCHLOROQUINE 200MG TB	42940	\$0.8535	\$0.5690	\$0.6031	\$0.0341	10-12-2004
	HYDROXYUREA 500MG CAPSULE	38400	\$0.0000	\$0.8805	\$0.9466	\$0.0861	10-12-2004
	HYDROXYZINE 10MG/5ML SYRUP	13932	\$0.0367	\$0.0483	\$0.0532	\$0.0048	10-12-2004
	HYDROXYZINE HCL 25MG TABLET	13943	\$0.7134	\$0.5700	\$0.6042	\$0.0342	10-12-2004
	HYDROXYZINE HCL 50MG TABLET	13944	\$0.0000	\$0.6900	\$0.7590	\$0.0690	10-12-2004
	HYDROXYZINE PAM 25MG CAP	13952	\$0.0892	\$0.0729	\$0.0773	\$0.0044	10-12-2004
	HYDROXYZINE PAM 50MG CAP	13953	\$0.1013	\$0.0785	\$0.0948	\$0.0163	10-12-2004

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Lower of Logic Applies to Pricing

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	IBUPROFEN 100MG/5ML SUSPENSION	35930		\$0.0395	\$0.0435	\$0.0040	10-12-2004
	IBUPROFEN 400MG TABLET	35741	\$0.0493	\$0.0284	\$0.0312	\$0.0028	10-12-2004
	IBUPROFEN 600MG TABLET	35742	\$0.0573	\$0.0382	\$0.0420	\$0.0038	10-12-2004
	IBUPROFEN 800MG TABLET	35744	\$0.1065	\$0.0521	\$0.0552	\$0.0031	10-12-2004
	IMIPRAMINE HCL 10MG TABLET	16541	\$0.2643	\$0.1762	\$0.1938	\$0.0176	10-12-2004
	IMIPRAMINE HCL 25MG TABLET	16542	\$0.3551	\$0.2367	\$0.2604	\$0.0237	10-12-2004
	IMIPRAMINE HCL 50MG TABLET	16543	\$0.4604	\$0.3069	\$0.3376	\$0.0307	10-12-2004
	INDAPAMIDE 1.25MG TABLET	07311	\$0.1035	\$0.0525	\$0.0578	\$0.0053	10-12-2004
	INDAPAMIDE 2.5MG TABLET	07310	\$0.1125	\$0.0750	\$0.0825	\$0.0075	10-12-2004
	INDOMETHACIN 25MG CAPSULE	35680	\$0.0000	\$0.0544	\$0.0577	\$0.0033	10-12-2004
	INDOMETHACIN 50MG CAPSULE	35681	\$0.0000	\$0.0645	\$0.0684	\$0.0039	10-12-2004
	IPRATROPIUM 0.03% SPRAY	42239		\$1.3813	\$1.4642	\$0.0829	10-12-2004
	IPRATROPIUM BR 0.02% SOLUTION	42235	\$0.2340	\$0.0731	\$0.2340	\$0.1609	10-12-2004
	ISOFLURANE LIQUID	12681		\$0.2000	\$0.2200	\$0.0200	10-12-2004
	ISONIAZID 100MG TABLET	41741	\$0.0000	\$0.0445	\$0.0472	\$0.0027	10-12-2004
	ISONIAZID 300MG TABLET	41742	\$0.0890	\$0.0775	\$0.0822	\$0.0047	10-12-2004
	ISOSORBIDE DN 10MG TABLET	01942	\$0.0228	\$0.0341	\$0.0375	\$0.0034	10-12-2004
	ISOSORBIDE DN 20MG TABLET	01944	\$0.0558	\$0.0372	\$0.0409	\$0.0037	10-12-2004
	ISOSORBIDE DN 5MG TABLET	01947	\$0.0217	\$0.0687	\$0.0728	\$0.0041	10-12-2004
	ISOSORBIDE MN 10MG TABLET	01932	\$0.6110	\$0.4073	\$0.4480	\$0.0407	10-12-2004
	ISOSORBIDE MN 20MG TABLET	01931	\$0.4950	\$0.3750	\$0.3975	\$0.0225	10-12-2004
	ISOSORBIDE MN 30MG TAB SA	48104		\$0.7748	\$0.8213	\$0.0465	10-12-2004
	ISOSORBIDE MN 60MG TAB SA	48102	\$0.7492	\$0.5625	\$0.5963	\$0.0337	10-12-2004
	ISOTRETINOIN 10MG CAPSULE	59841		\$5.6265	\$6.1892	\$0.5627	10-12-2004
	ISOTRETINOIN 20MG CAPSULE	59842		\$6.6721	\$7.3393	\$0.6672	10-12-2004
	ISOTRETINOIN 40MG CAPSULE	59843		\$7.7516	\$8.5268	\$0.7752	10-12-2004
	KCL 10MEQ IN D5W/0.3% NACL	62940		\$0.0075	\$0.0082	\$0.0007	10-12-2004
	KCL 10MEQ IN D5W/NACL 0.225%	62723		\$0.0071	\$0.0078	\$0.0007	10-12-2004
	KCL 10MEQ IN D5W/NACL 0.45%	62663		\$0.0075	\$0.0082	\$0.0007	10-12-2004
	KCL 20MEQ IN D5W/NACL 0.9%	62600		\$0.0033	\$0.0037	\$0.0003	10-12-2004
	KCL 20MEQ/NS 1000ML IV SOLN	56590		\$0.0069	\$0.0076	\$0.0007	10-12-2004
	KETOCONAZOLE 200MG TABLET	42590	\$2.7750	\$1.8500	\$2.0350	\$0.1850	10-12-2004
	KETOROLAC 10MG TABLET	32531	\$0.6773	\$0.6470	\$0.6858	\$0.0388	10-12-2004
	KETOROLAC 15MG/ML VIAL	35238		\$3.0000	\$3.1800	\$0.1800	10-12-2004
	KETOROLAC 30MG/ML VIAL	35236		\$1.8000	\$1.9800	\$0.1800	10-12-2004
	KETOROLAC 30MG/ML VIAL	35239		\$2.6200	\$2.7772	\$0.1572	10-12-2004

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Difference = MAC - WAC
Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	KETOROLAC IV/IM 15MG/ML TUBEX	35275		\$5.6370	\$5.9752	\$0.3382	10-12-2004
	LABELALOL HCL 100MG TABLET	10342	\$0.2157	\$0.2094	\$0.2220	\$0.0126	10-12-2004
	LABELALOL HCL 200MG TABLET	10341	\$0.3582	\$0.2958	\$0.3135	\$0.0177	10-12-2004
	LABELALOL HCL 300MG TABLET	10340	\$0.5363	\$0.3946	\$0.4183	\$0.0237	10-12-2004
	LABELALOL HCL 5MG/ML VIAL	18990		\$0.9525	\$1.0478	\$0.0952	10-12-2004
	LACLOTHION 12% LOTION	20941		\$0.1356	\$0.1437	\$0.0081	10-12-2004
	LACTATED RINGERS INJECTION	02840		\$0.0064	\$0.0070	\$0.0006	10-12-2004
	LACTULOSE 10GM/15ML SOLN	10161	\$0.0219	\$0.0222	\$0.0235	\$0.0013	10-12-2004
	LACTULOSE 10GM/15ML SYRUP	10160	\$0.0219	\$0.0235	\$0.0249	\$0.0014	10-12-2004
	LEVOBUNOLOL 0.25% EYE DROPS	33311	\$1.2749	\$0.8500	\$0.9350	\$0.0850	10-12-2004
	LEVOBUNOLOL 0.5% EYE DROPS	33310	\$1.4925	\$0.9300	\$1.0230	\$0.0930	10-12-2004
	LEVOCARNITINE 200MG/ML VIAL	85421		\$6.1440	\$6.5126	\$0.3686	10-12-2004
	LEVOTHYROXINE 100MCG TABLET	26323		\$0.2138	\$0.2266	\$0.0128	10-12-2004
	LEVOTHYROXINE 112MCG TABLET	26320		\$0.2472	\$0.2620	\$0.0148	10-12-2004
	LEVOTHYROXINE 125MCG TABLET	26326		\$0.2506	\$0.2656	\$0.0150	10-12-2004
	LEVOTHYROXINE 137MCG TABLET	47632		\$0.3512	\$0.3723	\$0.0211	10-12-2004
	LEVOTHYROXINE 150MCG TABLET	26327		\$0.2580	\$0.2735	\$0.0155	10-12-2004
	LEVOTHYROXINE 175MCG TABLET	26328		\$0.3066	\$0.3250	\$0.0184	10-12-2004
	LEVOTHYROXINE 200MCG TABLET	26325		\$0.3073	\$0.3257	\$0.0184	10-12-2004
	LEVOTHYROXINE 25MCG TABLET	26321		\$0.1663	\$0.1763	\$0.0100	10-12-2004
	LEVOTHYROXINE 300MCG TABLET	26329		\$0.4184	\$0.4435	\$0.0251	10-12-2004
	LEVOTHYROXINE 50MCG TABLET	26322		\$0.1889	\$0.2002	\$0.0113	10-12-2004
	LEVOTHYROXINE 75MCG TABLET	26324		\$0.2086	\$0.2211	\$0.0125	10-12-2004
	LEVOTHYROXINE 88MCG TABLET	47631		\$0.2123	\$0.2250	\$0.0127	10-12-2004
	LIDOCAINE 0.4% IN D5W SOLN	51711		\$0.0272	\$0.0299	\$0.0027	10-12-2004
	LIDOCAINE 0.8% IN D5W SOLN	51710		\$0.0346	\$0.0380	\$0.0035	10-12-2004
	LIDOCAINE 2% VISCOUS SOLN	11941	\$0.0278	\$0.0210	\$0.0278	\$0.0068	10-12-2004
	LIDOCAINE HCL 1% VIAL	11854		\$0.1854	\$0.1965	\$0.0111	10-12-2004
	LIDOCAINE HCL 2% JELLY	11870		\$1.1500	\$1.2190	\$0.0690	10-12-2004
	LIDOCAINE HCL 2% VIAL	11857		\$0.2220	\$0.2353	\$0.0133	10-12-2004
	LIDOCAINE HCL 4% SOLUTION	11942		\$1.7700	\$1.9470	\$0.1770	10-12-2004
	LIDOCAINE-PRILOCAINE CREAM	05987		\$1.2800	\$1.4080	\$0.1280	10-12-2004
	LIPOSYN II 10% IV FAT EMUL	25210		\$0.0637	\$0.0675	\$0.0038	10-12-2004
	LISINAPRIL 10MG TABLET	47261	\$0.5970	\$0.3980	\$0.4378	\$0.0398	10-12-2004
	LISINAPRIL 2.5MG TABLET	47264	\$0.3855	\$0.2570	\$0.2827	\$0.0257	10-12-2004
	LISINAPRIL 20MG TABLET	47262	\$0.6390	\$0.4260	\$0.4686	\$0.0426	10-12-2004

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Difference = MAC - WAC

Lower of Logic Applies to Pricing

BATES STAMP NO

000000043

JDVA000000043

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	LISINAPRIL 30MG TABLET	47265	\$0.9038	\$0.6025	\$0.6628	\$0.0602	10-12-2004
	LISINAPRIL 40MG TABLET	47263	\$0.9345	\$0.6230	\$0.6853	\$0.0623	10-12-2004
	LISINAPRIL 5MG TABLET	47260	\$0.5783	\$0.3855	\$0.4241	\$0.0386	10-12-2004
	LISINAPRIL-HCTZ 10/12.5 TAB	88002	\$0.6450	\$0.4300	\$0.4730	\$0.0430	10-12-2004
	LISINAPRIL-HCTZ 20/12.5 TAB	88000	\$0.6983	\$0.4655	\$0.5121	\$0.0466	10-12-2004
	LISINAPRIL-HCTZ 20/25 TAB	88001	\$0.7065	\$0.4710	\$0.5181	\$0.0471	10-12-2004
	LITHIUM 300MG ER TABLET	15731		\$0.3312	\$0.3643	\$0.0331	10-12-2004
	LITHIUM CARBONATE 300MG CP	15710	\$0.0000	\$0.1399	\$0.1539	\$0.0140	10-12-2004
	LORAZEPAM 0.5MG TABLET	14160	\$0.4350	\$0.2900	\$0.3074	\$0.0174	10-12-2004
	LORAZEPAM 1MG TABLET	14161	\$0.5718	\$0.3812	\$0.4041	\$0.0229	10-12-2004
	LORAZEPAM 2MG TABLET	14162	\$0.5698	\$0.5655	\$0.6221	\$0.0566	10-12-2004
	LORAZEPAM 2MG/ML VIAL	14140		\$3.0000	\$3.1800	\$0.1800	10-12-2004
	LORAZEPAM 4MG/ML VIAL	14141		\$6.2500	\$6.6250	\$0.3750	10-12-2004
	LOVASTATIN 10MG TABLET	47042	\$0.7487	\$0.6527	\$0.7179	\$0.0653	10-12-2004
	LOVASTATIN 20MG TABLET	47040	\$1.2488	\$1.1850	\$1.2561	\$0.0711	10-12-2004
	LOVASTATIN 40MG TABLET	47041	\$3.2012	\$2.1341	\$2.3475	\$0.2134	10-12-2004
	MANNITOL 10% IV SOLUTION	34530		\$0.0336	\$0.0370	\$0.0034	10-12-2004
	MANNITOL 15% IV SOLUTION	34531		\$0.0228	\$0.0251	\$0.0023	10-12-2004
	MANNITOL 20% IV SOLUTION	34532		\$0.0985	\$0.1083	\$0.0098	10-12-2004
	MANNITOL 25% VIAL	34551		\$0.0362	\$0.0384	\$0.0022	10-12-2004
	MANNITOL 5% IV SOLUTION	34533		\$0.0236	\$0.0260	\$0.0024	10-12-2004
	MECLIZINE 12.5MG TABLET	18301	\$0.0599	\$0.0433	\$0.0476	\$0.0043	10-12-2004
	MECLIZINE 25MG TABLET	18302	\$0.0717	\$0.0519	\$0.0571	\$0.0052	10-12-2004
	MEDROXYPROGESTERONE 10MG TB	11260	\$0.3787	\$0.2856	\$0.3027	\$0.0171	10-12-2004
	MEDROXYPROGESTERONE 2.5MG	11261	\$0.2025	\$0.1790	\$0.1897	\$0.0107	10-12-2004
	MEDROXYPROGESTERONE 5MG TAB	11262	\$0.3061	\$0.2499	\$0.2649	\$0.0150	10-12-2004
	MEGESTROL 20MG TABLET	38680	\$0.3489	\$0.2523	\$0.2674	\$0.0151	10-12-2004
	MEGESTROL 40MG TABLET	38681	\$0.6755	\$0.4503	\$0.4953	\$0.0450	10-12-2004
	MEPERIDINE 100MG TABLET	15990	\$1.0347	\$0.7318	\$0.7757	\$0.0439	10-12-2004
	MEPERIDINE 100MG/ML VIAL	15960		\$0.9600	\$1.0176	\$0.0576	10-12-2004
	MEPERIDINE 50MG TABLET	15991	\$0.5370	\$0.3621	\$0.3983	\$0.0362	10-12-2004
	METFORMIN HCL 1000MG TABLET	10857		\$0.4000	\$0.4240	\$0.0240	10-12-2004
	METFORMIN HCL 500MG TABLET	10810	\$0.3557	\$0.2900	\$0.3074	\$0.0174	10-12-2004
	METFORMIN HCL 850MG TABLET	10811	\$0.3863	\$0.3800	\$0.4028	\$0.0228	10-12-2004
	METFORMIN HCL ER 500MG TAB	89863		\$0.5636	\$0.5974	\$0.0338	10-12-2004
	METHADONE 10MG/ML ORAL CONC	16415	\$0.0000	\$0.0675	\$0.0743	\$0.0068	10-12-2004

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	METHADONE HCL 10MG TABLET	16420		\$0.0985	\$0.1044	\$0.0059	10-12-2004
	METHADONE HCL 40MG TAB DISP	16423		\$0.2480	\$0.2728	\$0.0248	10-12-2004
	METHADONE HCL 5MG TABLET	16422		\$0.0575	\$0.0633	\$0.0058	10-12-2004
	METHAZOLAMIDE 25MG TABLET	34741	\$0.3150	\$0.2100	\$0.2310	\$0.0210	10-12-2004
	METHOCARBAMOL 500MG TABLET	17892	\$0.1463	\$0.1279	\$0.1356	\$0.0077	10-12-2004
	METHOCARBAMOL 750MG TABLET	17893	\$0.1792	\$0.1274	\$0.1350	\$0.0076	10-12-2004
	METHOTREXATE 2.5MG TABLET	38489	\$1.2637	\$0.8425	\$0.8931	\$0.0506	10-12-2004
	METHYLPHENIDATE 10MG TABLET	15911	\$0.4224	\$0.3408	\$0.3612	\$0.0204	10-12-2004
	METHYLPHENIDATE 20MG TABLET	15920	\$0.6180	\$0.4900	\$0.5194	\$0.0294	10-12-2004
	METHYLPHENIDATE 5MG TABLET	15913	\$0.3020	\$0.2390	\$0.2533	\$0.0143	10-12-2004
	METHYLPHENIDATE ER 20MG TABLET SA	16180	\$0.0000	\$0.7801	\$0.8581	\$0.0780	10-12-2004
	METHYLPREDNISOLONE 4MG TAB	27056	\$0.2849	\$0.2869	\$0.3041	\$0.0172	10-12-2004
	METOCLOPRAMIDE 10MG TABLET	21020	\$0.1095	\$0.0725	\$0.0798	\$0.0073	10-12-2004
	METOCLOPRAMIDE 5MG TABLET	21021	\$0.1842	\$0.1228	\$0.1302	\$0.0074	10-12-2004
	METOCLOPRAMIDE 5MG/5ML SYRP	03610	\$0.0155	\$0.0133	\$0.0141	\$0.0008	10-12-2004
	METOCLOPRAMIDE 5MG/ML VIAL	20510		\$0.3750	\$0.3975	\$0.0225	10-12-2004
	METOLAZONE 10MG TABLET	34990		\$1.1077	\$1.2185	\$0.1108	10-12-2004
	METOLAZONE 2.5MG TABLET	34991		\$0.8140	\$0.8954	\$0.0814	10-12-2004
	METOLAZONE 5MG TABLET	34992		\$1.3718	\$1.4541	\$0.0823	10-12-2004
	METOPROLOL 100MG TABLET	20641	\$0.0914	\$0.0618	\$0.0655	\$0.0037	10-12-2004
	METOPROLOL 50MG TABLET	20642	\$0.0703	\$0.0373	\$0.0395	\$0.0022	10-12-2004
	METRONIDAZOLE 0.75% CREAM	43203		\$1.2071	\$1.2795	\$0.0724	10-12-2004
	METRONIDAZOLE 250MG TABLET	43031	\$0.0849	\$0.0712	\$0.0755	\$0.0043	10-12-2004
	METRONIDAZOLE 500MG TABLET	43032	\$0.2184	\$0.1735	\$0.1839	\$0.0104	10-12-2004
	MEXILETINE 200MG CAPSULE	12211	\$0.9712	\$0.6475	\$0.6864	\$0.0389	10-12-2004
	MEXILETINE 250MG CAPSULE	12212	\$0.0000	\$0.7530	\$0.7982	\$0.0452	10-12-2004
	MIDODRINE 10MG TABLET	17566		\$4.6044	\$4.8807	\$0.2763	10-12-2004
	MIDODRINE 2.5MG TABLET	28322		\$1.1434	\$1.2120	\$0.0686	10-12-2004
	MIDODRINE 5MG TABLET	28321		\$2.3022	\$2.4403	\$0.1381	10-12-2004
	MILRINONE 0.2MG/ML IN D5W	05320		\$0.9856	\$1.0447	\$0.0591	10-12-2004
	MILRINONE LACTATE 1MG/ML VL	05321		\$1.2000	\$1.2720	\$0.0720	10-12-2004
	MINOCYCLINE 50MG CAPSULE	40411	\$0.9000	\$0.6000	\$0.6360	\$0.0360	10-12-2004
	MINOCYCLINE 75MG CAPSULE	93387		\$1.4847	\$1.5738	\$0.0891	10-12-2004
	MINOXIDIL 10MG TABLET	01290	\$0.6965	\$0.4643	\$0.5107	\$0.0464	10-12-2004
	MINOXIDIL 2.5MG TABLET	01291	\$0.3170	\$0.2113	\$0.2324	\$0.0211	10-12-2004
	MIRTAZAPINE 15MG TABLET	16732		\$1.0867	\$1.1953	\$0.1087	10-12-2004

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VIRGINIA MEDICAID MAC LIST

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	MIRTAZAPINE 30MG TABLET	16733		\$1.1183	\$1.2302	\$0.1118	10-12-2004
	MORPHINE SULF 100MG TAB SA	16642		\$3.2874	\$3.4846	\$0.1972	10-12-2004
	MORPHINE SULF 15MG TAB SA	16643		\$0.5988	\$0.6587	\$0.0599	10-12-2004
	MORPHINE SULF 200MG TAB SA	16078		\$5.9948	\$6.5943	\$0.5995	10-12-2004
	MORPHINE SULF 30MG TAB SA	16640		\$1.1380	\$1.2518	\$0.1138	10-12-2004
	MORPHINE SULF 60MG TAB SA	16641		\$2.2203	\$2.4423	\$0.2220	10-12-2004
	MORPHINE-PF 0.5MG/ML AMP	19827		\$3.9175	\$4.3093	\$0.3918	10-12-2004
	MORPHINE-PF 1MG/ML AMPUL	19828		\$4.3170	\$4.7487	\$0.4317	10-12-2004
	MUPIROCIN 2% OINTMENT	47450		\$1.8136	\$1.9224	\$0.1088	10-12-2004
	NADOLOL 120MG TABLET	20650	\$0.0000	\$0.6369	\$0.7006	\$0.0637	10-12-2004
	NADOLOL 160MG TABLET	20651	\$0.0000	\$0.6541	\$0.7195	\$0.0654	10-12-2004
	NADOLOL 20MG TABLET	20654	\$0.4650	\$0.2819	\$0.2988	\$0.0169	10-12-2004
	NADOLOL 40MG TABLET	20652	\$0.4289	\$0.3175	\$0.3366	\$0.0191	10-12-2004
	NADOLOL 80MG TABLET	20653	\$0.8025	\$0.4419	\$0.4684	\$0.0265	10-12-2004
	NALTREXONE 50MG TABLET	17070	\$4.0400	\$2.8425	\$3.0131	\$0.1706	10-12-2004
	NAPHAZOLE 0.1% EYE DROPS	32252	\$0.3140	\$0.2707	\$0.2869	\$0.0162	10-12-2004
	NAPROXEN 250MG TABLET	35790	\$0.1044	\$0.0802	\$0.0850	\$0.0048	10-12-2004
	NAPROXEN 375MG TABLET	35792	\$0.1383	\$0.0922	\$0.0977	\$0.0055	10-12-2004
	NAPROXEN 375MG TABLET EC	61850	\$0.0000	\$0.4691	\$0.4972	\$0.0281	10-12-2004
	NAPROXEN 500MG TABLET	35793	\$0.1805	\$0.1203	\$0.1275	\$0.0072	10-12-2004
	NAPROXEN 500MG TABLET EC	61851	\$0.0000	\$0.5730	\$0.6303	\$0.0573	10-12-2004
	NAPROXEN SODIUM 275MG TAB	47130	\$0.0000	\$0.2115	\$0.2327	\$0.0212	10-12-2004
	NAPROXEN SODIUM 550MG TAB	47131	\$0.0000	\$0.3324	\$0.3656	\$0.0332	10-12-2004
	NEFAZODONE HCL 100MG TABLET	16406		\$0.3920	\$0.4312	\$0.0392	10-12-2004
	NEFAZODONE HCL 150MG TABLET	16407		\$0.3979	\$0.4377	\$0.0398	10-12-2004
	NEFAZODONE HCL 200MG TABLET	16408		\$0.4035	\$0.4439	\$0.0404	10-12-2004
	NEFAZODONE HCL 250MG TABLET	16409		\$0.4179	\$0.4597	\$0.0418	10-12-2004
	NEFAZODONE HCL 50MG TABLET	16404		\$0.3800	\$0.4028	\$0.0228	10-12-2004
	NEO/POLY/DEXAMET EYE OINT	14285	\$1.0713	\$0.8000	\$0.8480	\$0.0480	10-12-2004
	NEO/POLYMYXIN/DEXAMETH DROP	14286	\$0.0000	\$0.4540	\$0.4994	\$0.0454	10-12-2004
	NEO/POLYMYXIN/HCL EAR SOLN	14023	\$0.0000	\$1.4770	\$1.5656	\$0.0886	10-12-2004
	NEO-BACIT-POLY EYE OINTMENT	14283	\$0.0000	\$0.9429	\$1.0371	\$0.0943	10-12-2004
	NEOMYCIN/POLY/GRAM EYE DROP	87220	\$2.2185	\$1.9280	\$2.1208	\$0.1928	10-12-2004
	NICARDIPINE 20MG CAPSULE	02390	\$0.3375	\$0.1700	\$0.1802	\$0.0102	10-12-2004
	NICARDIPINE 30MG CAPSULE	02391	\$0.4050	\$0.2700	\$0.2862	\$0.0162	10-12-2004
	NIFEDIPINE 10MG CAPSULE	02350	\$0.0000	\$0.1400	\$0.1484	\$0.0084	10-12-2004

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VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	NIFEDIPINE CR 30MG TABLET	02226		\$1.0063	\$1.0667	\$0.0604	10-12-2004
	NIFEDIPINE CR 60MG TABLET	02227		\$1.7926	\$1.9002	\$0.1076	10-12-2004
	NIFEDIPINE XL 30MG TABLET	02221		\$1.0695	\$1.1765	\$0.1070	10-12-2004
	NIFEDIPINE XL 60MG TABLET	02222		\$1.8132	\$1.9945	\$0.1813	10-12-2004
	NITROFURANTOIN MCR 100MG CP	41820	\$0.0000	\$1.4590	\$1.6049	\$0.1459	10-12-2004
	NITROFURANTOIN MCR 50MG CAP	41822	\$0.0000	\$0.8590	\$0.9449	\$0.0859	10-12-2004
	NITROFURANTOIN-MACRO 100MG	49001		\$1.6289	\$1.7266	\$0.0977	10-12-2004
	NITROGLYCERIN 0.1MG/HR PTCH	01741		\$1.3500	\$1.4850	\$0.1350	10-12-2004
	NITROGLYCERIN 0.2MG/HR PTCH	01742	\$0.0000	\$0.6783	\$0.7189	\$0.0406	10-12-2004
	NITROGLYCERIN 0.4MG/HR PTCH	01740	\$0.0000	\$0.8000	\$0.8480	\$0.0480	10-12-2004
	NITROGLYCERIN 0.6MG/HR PTCH	01744	\$0.0000	\$1.6500	\$1.8150	\$0.1650	10-12-2004
	NIZATIDINE 150MG CAPSULE	47710	\$1.8307	\$1.5533	\$1.6465	\$0.0932	10-12-2004
	NIZATIDINE 300MG CAPSULE	47711	\$3.6615	\$3.0450	\$3.2277	\$0.1827	10-12-2004
	NORTRIPTYLINE 10MG/5ML SOLUTION	16535		\$0.0978	\$0.1037	\$0.0059	10-12-2004
	NORTRIPTYLINE HCL 10MG CAP	16529	\$0.1019	\$0.0680	\$0.0748	\$0.0068	10-12-2004
	NORTRIPTYLINE HCL 25MG CAP	16532	\$0.1406	\$0.0938	\$0.1032	\$0.0094	10-12-2004
	NORTRIPTYLINE HCL 50MG CAP	16533	\$0.1722	\$0.1148	\$0.1263	\$0.0115	10-12-2004
	NORTRIPTYLINE HCL 75MG CAP	16534	\$0.2203	\$0.1469	\$0.1616	\$0.0147	10-12-2004
	NYSTATIN 100000U/GM CREAM	30140	\$0.0755	\$0.0753	\$0.0798	\$0.0045	10-12-2004
	NYSTATIN 100000U/GM OINT	30150	\$0.1019	\$0.0787	\$0.0865	\$0.0079	10-12-2004
	NYSTATIN 100000U/ML SUSP	42440	\$0.0000	\$0.2117	\$0.2328	\$0.0212	10-12-2004
	NYSTATIN 500000U ORAL TAB	42452	\$0.0000	\$0.4776	\$0.5254	\$0.0478	10-12-2004
	NYSTATIN/TRIAMCINOLONE CREAM	14007	\$0.0975	\$0.0650	\$0.0689	\$0.0039	10-12-2004
	OFLOXACIN 0.3% EYE DROPS	36600		\$5.2480	\$5.5629	\$0.3149	10-12-2004
	OFLOXACIN 200MG TABLET	43691		\$3.5878	\$3.9466	\$0.3588	10-12-2004
	OFLOXACIN 300MG TABLET	43692		\$4.2697	\$4.6967	\$0.4270	10-12-2004
	OFLOXACIN 400MG TABLET	43693		\$4.5027	\$4.7729	\$0.2702	10-12-2004
	OMEPRAZOLE 10MG CAPSULE DR	92989		\$2.3642	\$2.6006	\$0.2364	10-12-2004
	OMEPRAZOLE 20MG CAPSULE DR	04348		\$2.6527	\$2.9180	\$0.2653	10-12-2004
	ORPHENADRINE COMP FORTE TAB	71200	\$0.0000	\$0.8072	\$0.8556	\$0.0484	10-12-2004
	ORPHENADRINE COMP TABLET	71190	\$0.0000	\$0.5500	\$0.6050	\$0.0550	10-12-2004
	OXAPROZIN 600MG TABLET	01750	\$0.6758	\$1.1200	\$1.1872	\$0.0672	10-12-2004
	OXAZEPAM 10MG CAPSULE	14230	\$0.5363	\$0.2217	\$0.2350	\$0.0133	10-12-2004
	OXAZEPAM 15MG CAPSULE	14231	\$0.7624	\$0.6429	\$0.6815	\$0.0386	10-12-2004
	OXAZEPAM 30MG CAPSULE	14232	\$1.2337	\$0.8225	\$0.8719	\$0.0494	10-12-2004
	OXYBUTYNIN 5MG TABLET	19380	\$0.1260	\$0.1100	\$0.1166	\$0.0066	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	OXYBUTYNIN 5MG/5ML SYRUP	19370		\$0.0751	\$0.0796	\$0.0045	10-12-2004
	OXYCODONE HCL 15MG TABLET	20091		\$0.4725	\$0.5009	\$0.0284	10-12-2004
	OXYCODONE HCL 30MG TABLET	20092		\$0.9100	\$0.9646	\$0.0546	10-12-2004
	OXYCODONE HCL-APAP 10/32.5MG TB	14966		\$1.4201	\$1.5621	\$0.1420	10-12-2004
	OXYCODONE HCL-APAP 7.5/500 TAB	50756		\$0.6893	\$0.7582	\$0.0689	10-12-2004
	OXYCODONE W/APAP 5/325 TAB	70491	\$0.1192	\$0.0995	\$0.1192	\$0.0197	10-12-2004
	OXYCODONE W/APAP 5/500 CAP	70500	\$0.2137	\$0.2003	\$0.2123	\$0.0120	10-12-2004
	OXYCODONE/APAP 10/650MG TABLET	50766		\$0.9458	\$1.0404	\$0.0946	10-12-2004
	OXYCODONE/ASA 4.88/325 TAB	70481	\$0.0000	\$0.8531	\$0.9384	\$0.0853	10-12-2004
	OXYCODONE-APAP 7.5/325MG TAB	14965		\$1.0860	\$1.1946	\$0.1086	10-12-2004
	PACITAXEL 30MG/5ML VIAL	85602		\$23.5200	\$24.9312	\$1.4112	10-12-2004
	PAMIDRONATE 30MG/10ML VIAL	85997		\$23.2000	\$24.5920	\$1.3920	10-12-2004
	PANCURONIUM 2MG/ML VIAL	35991		\$1.3750	\$1.4575	\$0.0825	10-12-2004
	PAROXETINE HCL 10MG TABLET	16364		\$2.0260	\$2.2286	\$0.2026	10-12-2004
	PAROXETINE HCL 20MG TABLET	16366		\$2.0700	\$2.2770	\$0.2070	10-12-2004
	PAROXETINE HCL 30MG TABLET	16367		\$2.1780	\$2.3958	\$0.2178	10-12-2004
	PAROXETINE HCL 40MG TABLET	16368		\$2.3010	\$2.5311	\$0.2301	10-12-2004
	PENTAZOCINE/ACETAMIN TABLET	71050		\$0.6380	\$0.6763	\$0.0383	10-12-2004
	PENTAZOCINE/NALOXONE TABLET	71060		\$0.6502	\$0.6892	\$0.0390	10-12-2004
	PENTOXIFYLLINE 400MG TAB SA	11800	\$0.3147	\$0.2098	\$0.2224	\$0.0126	10-12-2004
	PERGOLIDE MESYL 0.05MG TAB	26090		\$0.8420	\$0.9262	\$0.0842	10-12-2004
	PERGOLIDE MESYL 0.25MG TAB	26091		\$1.3970	\$1.5367	\$0.1397	10-12-2004
	PERGOLIDE MESYL 1MG TAB	26092		\$2.9999	\$3.2999	\$0.3000	10-12-2004
	PERMETHRIN 5% CREAM	44370		\$0.3883	\$0.4272	\$0.0388	10-12-2004
	PERPHENAZINE 16MG TABLET	14650	\$1.3833	\$0.9222	\$1.0144	\$0.0922	10-12-2004
	PERPHENAZINE 2MG TABLET	14651	\$0.3473	\$0.4129	\$0.4542	\$0.0413	10-12-2004
	PERPHENAZINE 4MG TABLET	14652	\$0.0000	\$0.5650	\$0.6215	\$0.0565	10-12-2004
	PERPHENAZINE 8MG TABLET	14653	\$0.0000	\$0.6855	\$0.7541	\$0.0686	10-12-2004
	PHENTERMINE 30MG CAPSULE	20692	\$0.0000	\$0.6225	\$0.6599	\$0.0374	10-12-2004
	PHENTERMINE 37.5MG TABLET	20713	\$0.0000	\$0.9495	\$1.0065	\$0.0570	10-12-2004
	PHENYTOIN 125MG/5ML SUSPEN	17241		\$0.1124	\$0.1191	\$0.0067	10-12-2004
	PIROXICAM 10MG CAPSULE	35820	\$0.0891	\$0.0594	\$0.0630	\$0.0036	10-12-2004
	PIROXICAM 20MG CAPSULE	35821	\$0.1131	\$0.0754	\$0.0799	\$0.0045	10-12-2004
	POLYMYXIN B/TMP EYE DROPS	14294	\$1.2360	\$1.0350	\$1.0971	\$0.0621	10-12-2004
	POTASSIUM CL 10MEQ TAB SA	03512		\$0.1692	\$0.1861	\$0.0169	10-12-2004
	POTASSIUM CL 20MEQ TAB SA	03513		\$0.3083	\$0.3391	\$0.0308	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

BATES STAMP NO

000000048

JDVA000000048

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	POTASSIUM CL 2MEQ/ML VIAL	03350		\$0.1260	\$0.1336	\$0.0076	10-12-2004
	PRAZOSIN 1MG CAPSULE	01250	\$0.0000	\$0.1145	\$0.1260	\$0.0115	10-12-2004
	PRAZOSIN 2MG CAPSULE	01251	\$0.0000	\$0.2295	\$0.2525	\$0.0230	10-12-2004
	PRAZOSIN 5MG CAPSULE	01252	\$0.0000	\$0.3690	\$0.4059	\$0.0369	10-12-2004
	PREDNISOLONE 1% EYE DROPS	33153	\$1.6950	\$1.3240	\$1.4034	\$0.0794	10-12-2004
	PREDNISOLONE 15MG/5ML SYRUP	26800	\$0.2081	\$0.0706	\$0.0749	\$0.0042	10-12-2004
	PREDNISOLONE 6.7MG/5ML SOLN	09115		\$0.1309	\$0.1440	\$0.0131	10-12-2004
	PREDNISOLONE PHOS 1% EYE DROPS	33181	\$0.0000	\$2.1400	\$2.3540	\$0.2140	10-12-2004
	PREDNISON 10MG TABLET	27172	\$0.0000	\$0.0476	\$0.0524	\$0.0048	10-12-2004
	PREDNISON 20MG TABLET	27174	\$0.0000	\$0.0695	\$0.0765	\$0.0070	10-12-2004
	PREDNISON 5MG TABLET	27176	\$0.0000	\$0.0285	\$0.0314	\$0.0029	10-12-2004
	PRIMIDONE 250MG TABLET	17321	\$0.6956	\$0.6774	\$0.7180	\$0.0406	10-12-2004
	PRIMIDONE 50MG TABLET	17322		\$0.3465	\$0.3812	\$0.0347	10-12-2004
	PROBENECID 500MG TABLET	35072	\$0.7059	\$0.4708	\$0.5179	\$0.0471	10-12-2004
	PROCHLORPERAZINE 10MG TAB	14771	\$0.5766	\$0.4224	\$0.4477	\$0.0253	10-12-2004
	PROCHLORPERAZINE 5MG TAB	14773	\$0.3986	\$0.3195	\$0.3387	\$0.0192	10-12-2004
	PROCHLORPERAZINE 5MG/ML VL	14692		\$3.8250	\$4.2075	\$0.3825	10-12-2004
	PROMETHAZINE 25MG/ML AMPUL	14970		\$2.4500	\$2.5970	\$0.1470	10-12-2004
	PROMETHAZINE W/COD SYRUP	13971	\$0.0000	\$0.0320	\$0.0352	\$0.0032	10-12-2004
	PROPAFENONE HCL 150MG TAB	12431	\$1.1049	\$0.7366	\$0.8103	\$0.0737	10-12-2004
	PROPAFENONE HCL 225MG TAB	12433	\$1.5624	\$1.0416	\$1.1458	\$0.1042	10-12-2004
	PROPAFENONE HCL 300MG TAB	12432		\$1.8813	\$2.0594	\$0.1881	10-12-2004
	PROPARACAIN 0.5% EYE DROPS	32850	\$0.0000	\$0.3300	\$0.3630	\$0.0330	10-12-2004
	PROPOXY-NAPAP 100-650 TAB	70931	\$0.1800	\$0.1590	\$0.1685	\$0.0095	10-12-2004
	PROPOXYPHENE HCL 65MG CAP	16481	\$0.0000	\$0.2850	\$0.3021	\$0.0171	10-12-2004
	PROPRANOLOL 10MG TABLET	20630	\$0.0585	\$0.0390	\$0.0429	\$0.0039	10-12-2004
	PROPRANOLOL 20MG TABLET	20631	\$0.0705	\$0.0470	\$0.0517	\$0.0047	10-12-2004
	PROPRANOLOL 40MG TABLET	20632	\$0.0848	\$0.0565	\$0.0622	\$0.0057	10-12-2004
	PROPRANOLOL 80MG TABLET	20634	\$0.1140	\$0.0680	\$0.0748	\$0.0068	10-12-2004
	PROPRANOLOL/HCTZ 40/25 TAB	52030	\$0.0877	\$0.0585	\$0.0644	\$0.0059	10-12-2004
	PROPRANOLOL/HCTZ 80/25 TAB	52031	\$0.1320	\$0.0880	\$0.0968	\$0.0088	10-12-2004
	PYRIDOSTIGMINE BR 60MG TAB	18530		\$0.4200	\$0.4452	\$0.0252	10-12-2004
	QUINIDINE SULFATE 200MG TAB	01053	\$0.0000	\$0.1825	\$0.2008	\$0.0183	10-12-2004
	QUINIDINE SULFATE 300MG TAB	01055	\$0.0000	\$0.3574	\$0.3788	\$0.0214	10-12-2004
	RANITIDINE 150MG TABLET	10200	\$0.3411	\$0.2135	\$0.2263	\$0.0128	10-12-2004
	RANITIDINE 300MG TABLET	10201	\$0.3180	\$0.1450	\$0.1595	\$0.0145	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	RIBAVIRIN 200MG CAPSULE	14179		\$7.0600	\$7.7660	\$0.7060	10-12-2004
	RIFADIN 300MG CAPSULE	41261		\$1.9216	\$2.0369	\$0.1153	10-12-2004
	RINGERS INJECTION	04220		\$0.0031	\$0.0034	\$0.0003	10-12-2004
	RINGERS IRRIGATION	04221		\$0.0039	\$0.0042	\$0.0004	10-12-2004
	RINGER'S LACTATED RIRIG SOL	13420		\$0.0029	\$0.0032	\$0.0003	10-12-2004
	SELEGILINE HCL 5MG TABLET	15600	\$0.7658	\$0.4849	\$0.5140	\$0.0291	10-12-2004
	SELENIUM SULF 2.5% SHAMPOO	24341	\$0.0750	\$0.0508	\$0.0559	\$0.0051	10-12-2004
	SILVER SULFADIAZINE 1% CREAM	31630	\$0.0000	\$0.0682	\$0.1395	\$0.0713	10-12-2004
	SOD POLYSTYRENE SULFONATE POWDER	02890		\$0.4557	\$0.5013	\$0.0456	10-12-2004
	SODIUM CHLORIDE 0.9% VIAL	03034		\$0.3400	\$0.3604	\$0.0204	10-12-2004
	SOTALOL 120MG TABLET	39516	\$2.3550	\$1.5345	\$2.3550	\$0.8205	10-12-2004
	SOTALOL 160MG TABLET	39511	\$2.9250	\$1.9184	\$2.9250	\$1.0066	10-12-2004
	SOTALOL 80MG TABLET	39512	\$1.7850	\$1.1501	\$1.7559	\$0.6058	10-12-2004
	SOTALOL HCL 240MG TABLET	39513	\$3.9750	\$2.6500	\$2.8090	\$0.1590	10-12-2004
	SPIRONOLACT/HCTZ 25/25 TAB	82330	\$0.3463	\$0.2309	\$0.2448	\$0.0139	10-12-2004
	SPIRONOLACTONE 100MG TABLET	27690		\$0.9554	\$1.0509	\$0.0955	10-12-2004
	SPIRONOLACTONE 25MG TABLET	27691	\$0.3000	\$0.2555	\$0.2585	\$0.0030	10-12-2004
	SPIRONOLACTONE 50MG TABLET	27692		\$0.5699	\$0.6269	\$0.0570	10-12-2004
	STERILE WATER FOR INJECTION	02729		\$0.0160	\$0.0176	\$0.0016	10-12-2004
	STERILE WATER,IRRIGATION	45340		\$0.0054	\$0.0059	\$0.0005	10-12-2004
	SUCRALFATE 1GM TABLET	08200	\$0.3690	\$0.3529	\$0.3741	\$0.0212	10-12-2004
	SULFACETAMIDE-10 EYE DROPS	33340	\$0.1530	\$0.4150	\$0.4565	\$0.0415	10-12-2004
	SULFAMETHOXAZOLE W/TMP SUSPENSION	90150	\$0.0000	\$0.1010	\$0.1111	\$0.0101	10-12-2004
	SULFAMETHOXAZOLE/TMP DS TAB	90163	\$0.1590	\$0.1220	\$0.1293	\$0.0073	10-12-2004
	SULFAMETHOXAZOLE/TMP SS TAB	90161	\$0.1325	\$0.0970	\$0.1028	\$0.0058	10-12-2004
	SULFASALAZINE 500MG TABLET	41611	\$0.1565	\$0.1043	\$0.1147	\$0.0104	10-12-2004
	SULINDAC 150MG TABLET	35800	\$0.3317	\$0.2350	\$0.2491	\$0.0141	10-12-2004
	SULINDAC 200MG TABLET	35801	\$0.4289	\$0.2859	\$0.3145	\$0.0286	10-12-2004
	TAMOXIFEN 10MG TABLET	38720		\$0.6000	\$0.6600	\$0.0600	10-12-2004
	TAMOXIFEN 20MG TABLET	38721		\$1.1989	\$1.3188	\$0.1199	10-12-2004
	TEMASEPAM 15MG CAPSULE	13840	\$0.1365	\$0.0910	\$0.1001	\$0.0091	10-12-2004
	TEMASEPAM 30MG CAPSULE	13841	\$0.1748	\$0.1165	\$0.1282	\$0.0117	10-12-2004
	TERAZOSIN 10MG CAPSULE	47127	\$1.5413	\$1.0276	\$1.0893	\$0.0617	10-12-2004
	TERAZOSIN 1MG CAPSULE	47124	\$1.5413	\$1.0276	\$1.0893	\$0.0617	10-12-2004
	TERAZOSIN 2MG CAPSULE	47125	\$1.5413	\$1.0276	\$1.0893	\$0.0617	10-12-2004
	TERAZOSIN 5MG CAPSULE	47126	\$1.5413	\$1.0276	\$1.0893	\$0.0617	10-12-2004

Unless otherwise noted, data source from First DataBank effective 06-27-2004.
Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	TETRACYCLINE 250MG CAPSULE	40072	\$0.0000	\$0.0475	\$0.0504	\$0.0029	10-12-2004
	TETRACYCLINE 500MG CAPSULE	40073	\$0.0975	\$0.0650	\$0.0715	\$0.0065	10-12-2004
	THEOPHYLLINE 100MG TAB SA	00410	\$0.0000	\$0.1475	\$0.1564	\$0.0089	10-12-2004
	THEOPHYLLINE 200MG TAB SA	00411	\$0.0000	\$0.2042	\$0.2165	\$0.0123	10-12-2004
	THEOPHYLLINE 200MG/D5W 100ML	50160		\$0.0471	\$0.0518	\$0.0047	10-12-2004
	THEOPHYLLINE 200MG/D5W 50ML	50162		\$0.0942	\$0.1036	\$0.0094	10-12-2004
	THEOPHYLLINE 300MG CAP SA	00310		\$0.4619	\$0.4896	\$0.0277	10-12-2004
	THEOPHYLLINE 300MG TAB SA	00413	\$0.0000	\$0.2458	\$0.2605	\$0.0147	10-12-2004
	THEOPHYLLINE 400MG/D5W 100ML	50161		\$0.0481	\$0.0529	\$0.0048	10-12-2004
	THEOPHYLLINE 400MG/D5W SOLN	50292		\$0.0080	\$0.0088	\$0.0008	10-12-2004
	THEOPHYLLINE 400MG/D5W SOLN	50293		\$0.0196	\$0.0215	\$0.0020	10-12-2004
	THEOPHYLLINE 800MG/D5W SOLN	50291		\$0.0057	\$0.0063	\$0.0006	10-12-2004
	THEOPHYLLINE 800MG/D5W SOLN	50294		\$0.0074	\$0.0081	\$0.0007	10-12-2004
	THIORIDAZINE 100MG TABLET	14883	\$0.4941	\$0.3294	\$0.3623	\$0.0329	10-12-2004
	THIORIDAZINE 10MG TABLET	14882	\$0.2190	\$0.1536	\$0.1628	\$0.0092	10-12-2004
	THIORIDAZINE 25MG TABLET	14880	\$0.3030	\$0.2211	\$0.2344	\$0.0133	10-12-2004
	THIORIDAZINE 50MG TABLET	14881	\$0.3885	\$0.2765	\$0.2931	\$0.0166	10-12-2004
	THIOXIXENE 10MG CAPSULE	15691	\$0.4065	\$0.3545	\$0.3758	\$0.0213	10-12-2004
	THIOXIXENE 2MG CAPSULE	15692	\$0.1860	\$0.1868	\$0.1980	\$0.0112	10-12-2004
	THIOXIXENE 5MG CAPSULE	15694	\$0.2963	\$0.2767	\$0.2933	\$0.0166	10-12-2004
	TICLOPIDINE 250MG TABLET	26491	\$1.5119	\$1.1868	\$1.3055	\$0.1187	10-12-2004
	TIMOLOL 0.25% EYE DROPS	32820	\$0.6975	\$0.5200	\$0.5512	\$0.0312	10-12-2004
	TIMOLOL 0.5% EYE DROPS	32821	\$0.9000	\$0.9380	\$0.9943	\$0.0563	10-12-2004
	TIZANIDINE HCL 2MG TABLET	14690	\$0.8071	\$0.6943	\$0.7360	\$0.0417	10-12-2004
	TIZANIDINE HCL 4MG TABLET	14693	\$0.9560	\$0.8205	\$0.8697	\$0.0492	10-12-2004
	TOBRAMYCIN 0.3% EYE DROPS	33630	\$1.1850	\$0.5120	\$0.5427	\$0.0307	10-12-2004
	TOBRAMYCIN 40MG/ML VIAL	41185		\$2.4950	\$2.6447	\$0.1497	10-12-2004
	TOLAZAMIDE 250MG TABLET	05741	\$0.4005	\$0.2670	\$0.2937	\$0.0267	10-12-2004
	TORSEMIDE 100MG TABLET	21133		\$2.2800	\$2.5080	\$0.2280	10-12-2004
	TORSEMIDE 10MG TABLET	21131		\$0.5200	\$0.5720	\$0.0520	10-12-2004
	TORSEMIDE 20MG TABLET	21132		\$0.6100	\$0.6710	\$0.0610	10-12-2004
	TORSEMIDE 5MG TABLET	21130		\$0.4725	\$0.5198	\$0.0473	10-12-2004
	TRAMADOL HCL 50MG TABLET	07221	\$0.3068	\$0.1880	\$0.1993	\$0.0113	10-12-2004
	TRAZODONE 100MG TABLET	16392	\$0.1140	\$0.0760	\$0.0806	\$0.0046	10-12-2004
	TRAZODONE 150MG TABLET	16393	\$0.3113	\$0.2850	\$0.3021	\$0.0171	10-12-2004
	TRAZODONE 50MG TABLET	16391	\$0.0742	\$0.0495	\$0.0525	\$0.0030	10-12-2004

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Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	TRETINOIN 0.025% CREAM	22882		\$1.2430	\$1.3673	\$0.1243	10-12-2004
	TRIAMCINOLONE 0.025% CREAM	31231	\$0.0364	\$0.0533	\$0.0587	\$0.0053	10-12-2004
	TRIAMCINOLONE 0.025% OINT	31241	\$0.0000	\$0.0250	\$0.0265	\$0.0015	10-12-2004
	TRIAMCINOLONE 0.1% CREAM	31232	\$0.0448	\$0.0827	\$0.0876	\$0.0050	10-12-2004
	TRIAMCINOLONE 0.1% OINTMENT	31242	\$0.0502	\$0.0667	\$0.0707	\$0.0040	10-12-2004
	TRIAMCINOLONE 0.5% CREAM	31233	\$0.2370	\$0.1833	\$0.2017	\$0.0183	10-12-2004
	TRIAMTERENE/HCTZ 37.5/25 CP	88731	\$0.3177	\$0.2118	\$0.2330	\$0.0212	10-12-2004
	TRIAMTERENE/HCTZ 37.5/25 TB	88741	\$0.1932	\$0.1625	\$0.1723	\$0.0097	10-12-2004
	TRIAMTERENE/HCTZ 75/50 TAB	88740	\$0.0488	\$0.0400	\$0.0424	\$0.0024	10-12-2004
	TRIAZOLAM 0.125MG TABLET	14282	\$0.4041	\$0.2694	\$0.2856	\$0.0162	10-12-2004
	TRIAZOLAM 0.25MG TABLET	14280	\$0.0000	\$0.2941	\$0.3118	\$0.0177	10-12-2004
	TRIMETHOBENZAMIDE 300MG CAP	15775		\$0.6795	\$0.7475	\$0.0680	10-12-2004
	TRIMETHOPRIM 100MG TABLET	42200	\$0.0000	\$0.3105	\$0.3416	\$0.0311	10-12-2004
	TROPICAMIDE 1% EYE DROPS	33021	\$0.7000	\$1.7850	\$1.9635	\$0.1785	10-12-2004
	URSODIOL 300MG CAPSULE	01070		\$1.9439	\$2.0605	\$0.1166	10-12-2004
	VALPROATE SOD 500MG/5ML VL	64371		\$1.9864	\$2.1056	\$0.1192	10-12-2004
	VALPROIC ACID 250MG CAPSULE	17270	\$0.5250	\$0.3995	\$0.4395	\$0.0400	10-12-2004
	VALPROIC ACID 250MG/5ML SYR	17280	\$0.0594	\$0.0285	\$0.0314	\$0.0029	10-12-2004
	VERAPAMIL 120MG CAP PELLET	03003	\$0.8250	\$0.7604	\$0.8060	\$0.0456	10-12-2004
	VERAPAMIL 120MG TABLET	02341	\$0.1110	\$0.0875	\$0.0928	\$0.0053	10-12-2004
	VERAPAMIL 120MG TABLET SA	32472	\$0.0000	\$0.7250	\$0.7685	\$0.0435	10-12-2004
	VERAPAMIL 180MG CAP PELLET	03001	\$0.8700	\$0.7923	\$0.8398	\$0.0475	10-12-2004
	VERAPAMIL 180MG TABLET SA	32471	\$0.4838	\$0.3700	\$0.3922	\$0.0222	10-12-2004
	VERAPAMIL 240MG CAP PELLET	03002	\$0.9900	\$0.8955	\$0.9492	\$0.0537	10-12-2004
	VERAPAMIL 240MG TABLET SA	32470	\$0.4350	\$0.3700	\$0.3922	\$0.0222	10-12-2004
	VERAPAMIL 40MG TABLET	47110	\$0.1963	\$0.1092	\$0.1158	\$0.0066	10-12-2004
	VERAPAMIL 80MG TABLET	02342	\$0.0735	\$0.0515	\$0.0567	\$0.0052	10-12-2004
	VINORELBINE 10MG/ML VIAL	38580		\$75.2500	\$82.7750	\$7.5250	10-12-2004
	WARFARIN SODIUM 10MG TABLET	25790	\$0.0000	\$0.6605	\$0.7001	\$0.0396	10-12-2004
	WARFARIN SODIUM 1MG TABLET	25792	\$0.0000	\$0.3955	\$0.4192	\$0.0237	10-12-2004
	WARFARIN SODIUM 2.5MG TAB	25794	\$0.0000	\$0.4258	\$0.4513	\$0.0255	10-12-2004
	WARFARIN SODIUM 2MG TABLET	25791	\$0.0000	\$0.4129	\$0.4377	\$0.0248	10-12-2004
	WARFARIN SODIUM 3MG TABLET	25796	\$0.0000	\$0.4277	\$0.4534	\$0.0257	10-12-2004
	WARFARIN SODIUM 4MG TABLET	25797	\$0.0000	\$0.4289	\$0.4546	\$0.0257	10-12-2004
	WARFARIN SODIUM 5MG TABLET	25793	\$0.0000	\$0.4316	\$0.4575	\$0.0259	10-12-2004
	WARFARIN SODIUM 6MG TABLET	25798	\$0.0000	\$0.6122	\$0.6489	\$0.0367	10-12-2004

Unless otherwise noted, data source from First DataBank effective 08-27-2004.

Difference = MAC - WAC

Lower of Logic Applies to Pricing

VIRGINIA MEDICAID MAC LIST

CHANGE	DESCRIPTION	GCN	FUL	WAC	MAC	DIFFERENCE	EFFECTIVE DATE
	WARFARIN SODIUM 7.5MG TAB	25795	\$0.0000	\$0.6349	\$0.6730	\$0.0381	10-12-2004

BATES STAMP NO

000000053

Unless otherwise noted, data source from First DataBank effective 08-27-2004.
 Difference = MAC - WAC
 Lower of Logic Applies to Pricing

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